



Marion County Board of County Commissioners

Building Safety ▪ Permitting

2710 E. Silver Springs Blvd.
Ocala, FL 34470
Phone: 352-438-2400
buildingpermits@marionfl.org

Notice of Commencement

Permit no.: _____ Tax folio/Parcel ID: _____

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Florida Statutes (FS) chapter 713, the following information is provided in this notice of commencement.

1. Description of property should include the full legal description of property and street address, if available: _____
2. General description of improvement: _____
3. Owner or lessee information, if lessee is contracted for the improvement:
 - a. Name and address: _____
 - b. Interest in property: _____
 - c. Name and address of fee simple titleholder (if different from owner listed above): _____
4. Contractor / Qualifier: _____
 - a. Name and address: _____
 - b. Contractor phone number: _____
5. Surety name, address, and phone number (if applicable, attach copy payment bond): _____ 5c. Amount of bond: \$ _____
6. Lender name, address and phone number: _____
7. Persons within the state of Florida as designated by owner upon whom notices or other documents may be served as provided by FS section 713.13(1)(a),7 (provide name, mailing address and phone number of designated person): _____
8. In addition to himself or herself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section FS section 713.13(1)(b). Phone number of person entity designated by owner: _____
9. Notice of commencement expiration date (the expiration date will be 1 year from the date of recording unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of owner or lessee, or owners or lessee authorized officer / director / partner / manager Date

Signatory's title/office

STATE OF FLORIDA, County of _____ The foregoing instrument was acknowledged before me by means of

physical presence or online notarization, this _____ day of, _____ 20_____,

By _____, as _____ for

Authority / representative type; officer, trustee or attorney-in-fact

Name of party/corporation/company for whom instrument was executed

Signature of Notary Public

Personally, known or Produced identification _____

PMT 5 - Rev. 9-20-22 ADA