Permit Number	
Parcel ID Number	

## NOTICE OF COMMENCEMENT

## State of Florida **County of Gulf**

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with

	apter 713, Florida Statutes, the following information is provided in this <b>NOTICE OF COMMENCEMENT</b> .
1.	Description of Property (legal description):
2.	A) Street (job) Address:  General description of improvements:
	General accomption of improvements.
3.	Owner Information or Lessee information if the Lessee contracted for the improvement:
	A) Name and address:
	B) Name and address of fee simple titleholder (if different than Owner listed above)
	C) Interest in property:
4.	Contractor Information
	A) Name and address:
	B) Telephone Number: Fax No.; (optional)
5.	Surety (if applicable, a copy of the payment bond is attached)
	A) Name and address:
	B) Telephone No.:
	C) Amount of Bond: \$
6.	Lender
	A) Name and address:
	B) Telephone No.:
7.	Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as
	provided by Section 713.13(1)(a)7., Florida Statutes:
	A) Name and address:
	B) Telephone No.: Fax No.; (optional)
8.	(a) In addition to himself or herself, Owner designates of
	to receive a copy of the Lienor's Notice as provided in Section 713.13(1) (b), Florida Statutes
	(b) Phone Number of Person or entity designated by Owner:
	Expiration date of notice of commencement (the expiration date will be one (1) year from the date of recording unless a different date specified): .20
	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 1, 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 INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
(Si	gnature of Owner or Lessee, or Owner's or Lessee's)  (Print Name and Provide Signatory's Title/Office
by	e foregoing instrument was acknowledged before me this day of, 20, 20 asas(type of authority, e.g. officer, trustee, attorney in
fac	t) for as
for	(Name of Person) (type of authority, e.g. officer, trustee, attorney in fact)  (name of party on behalf of whom instrument was executed).
Pe	rsonally Known Produced ID Signature of Notary Public – State of Florida
Τv	pe of ID Print Name