



# Building Department

THIS INSTRUMENT PREPARED BY

Name \_\_\_\_\_

Address \_\_\_\_\_

State of Florida

## NOTICE OF COMMENCEMENT

Parcel ID Number (PID) \_\_\_\_\_

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

DESCRIPTION OF PROPERTY (Legal description of the property and street address)

\_\_\_\_\_

GENERAL DESCRIPTION OF IMPROVEMENT \_\_\_\_\_

\_\_\_\_\_

OWNER INFORMATION

Name and address: \_\_\_\_\_

CONTRACTOR

Name and address: \_\_\_\_\_

Persons within the State of Florida Designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.

Name and address: \_\_\_\_\_

In addition to himself, Owner Designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as Provided in Section 713.13(1)(b), Florida Statutes.

Expiration Date of Notice of Commencement

(The expiration date is 1 year from 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 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 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.**

STATE OF FLORIDA,  
COUNTY OF Volusia

OWNERS SIGNATURE

OWNERS PRINTED NAME

“(NOTE: Per Florida Statute 713.13(1) (g), owner must sign..... and no one else may be permitted to sign in his or her stead.)”

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is \_\_\_\_ personally known to me or \_\_\_\_ who has produced \_\_\_\_\_ as identification and who did (did not) take an oath.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or type name

(Notary Seal)

Notary Public – State of Florida Commission No. \_\_\_\_\_ My Commission Expires: \_\_\_\_\_