

Recording Stamp



TAX ID/PARCEL #:

## NOTICE OF COMMENCEMENT

**THE UNDERSIGNED** hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this **NOTICE OF COMMENCEMENT**.

1. **Description of property (legal description):** \_\_\_\_\_
  - a. Street (job) Address: \_\_\_\_\_
2. **General description of improvements:** \_\_\_\_\_
3. **Owner Information or Lessee information if the Lessee contracted for the improvements**
  - a. Name and Address: \_\_\_\_\_
  - b. Name and Address of fee simple titleholder (if other than owner): \_\_\_\_\_
  - c. Interest in property: \_\_\_\_\_
4. **Contractor Information**
  - a. Name and Address: \_\_\_\_\_
  - b. Telephone #: \_\_\_\_\_
5. **Surety Information (if applicable, a copy of the payment bond is attached)**
  - a. Name and Address: \_\_\_\_\_
  - b. Amount of Bond: \_\_\_\_\_
  - c. Telephone #: \_\_\_\_\_
6. **Lender**
  - a. Name and Address: \_\_\_\_\_
  - b. Telephone #: \_\_\_\_\_
7. **Person 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 #: \_\_\_\_\_
8. **In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes**
  - a. Name: \_\_\_\_\_
  - b. Telephone #: \_\_\_\_\_
9. **Expiration date of Notice of Commencement (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 SITE OF THE IMPROVEMENT 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  
COLUMBIA COUNTY**

\_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

\_\_\_\_\_  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me by means of ☐ physical presence or sworn to (or affirmed) by ☐ online notarization \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
as \_\_\_\_\_ for \_\_\_\_\_  
DATE MONTH YEAR NAME OF PERSON  
TYPE OF AUTHORITY - OFFICER, TRUSTEE, ATTORNEY IN FACT NAME OF PART ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of ID Produced \_\_\_\_\_  
SEAL/STAMP: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC - STATE OF FLORIDA

\_\_\_\_\_  
PRINT, TYPE, OR STAMP COMMISSIONED NAME OF NOTARY PUBLIC

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