Parcel ID Number	
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NOTICE OF COMMENCEMENT	
State of Florida	
County of Pinellas THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance wi	vith Section 713.13 of the
Florida Statutes, the following information is provided in this <b>NOTICE OF COMMENCEMENT</b> .	iai occion 7 to to of the
. 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 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 No.: 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.:	
<b>7. Persons within the State of Florida designated by Owner</b> upon whom notices or other documents may be served as 713.13 (1) (a) 7., Florida Statutes:	provided by Section
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:	1.6
9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and	• •
contractor, but will be 1 year from the date of recording unless a different date is specified):	, 20
CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND	
PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECOP	
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.  Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein a	are true to the hest of my
knowledge and belief.	are true to the best of my
(Signature of Owner or Lessee, or Owner's or Lessee's (Authorized Officer/Director/Partner/Manager)  (Print Name and Provide Signature of Owner or Lessee, or Owner's or Lessee's (Authorized Officer/Director/Partner/Manager)  (Print Name and Provide Signature of Owner or Lessee, or Owner's or Lessee's (Authorized Officer/Director/Partner/Manager)  (Print Name and Provide Signature of Owner or Lessee, or Owner's or Lessee's (Authorized Officer/Director/Partner/Manager)  (Print Name and Provide Signature of Owner or Lessee's (Authorized Officer/Director/Partner/Manager)	
	cer, trustee, attorney in fact)
for, as	, , , , , , , , , , , , , , , , , , ,
(Name of Person) (type of authority, e.g. officer, trustee, attorn	ney in fact)
for (name of party on behalf of whom instrument was executed).	
Personally Known Produced ID	
Type of ID Notary Signature Print name	
FIIII HAIII <del>U</del>	