NOTICE OF COMMENCEMENT

Permit No.	
Tax Folio No.	
	provement will be made to certain real property, and in accordance with ation is provided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description of property):	
2. General description of improvement(s):	
3. Owner or Lessee information (Lessee as owner of	anly if contracted for improvements)
	mity if contracted for improvements)
b. Interest in property:	
	f other than owner):
4. Contractor Information	
a. Name and address:	
	Fax No. (Opt.)
5. Surety Information	
c. Phone number:	Fax No. (Opt.)
6. Lender	1 ax 140. (Opt.)
a. Name and address:	
b. Phone number:	
	Owner upon who notices or other documents may be served as provided by
Section 713.13(l)(a)7., Florida Statutes:	
a. Name and address:	
b. Phone number:	
	owing person(s) to receive a copy of the Lienor's Notice as provided in
Section 713.13(l)(b), Florida Statutes:	
a. Name and address:	
b. Phone number:	
Expiration date of notice of commencement (the date is specified)	expiration date is 1 year from the date of recording unless a different
WADNING TO OWNED. ANY DAVM	ENTS MADE BY THE OWNER AFTER THE
	OMMENCEMENT ARE CONSIDERED IMPROPER
	PART 1, SECTION 713.13, FLORIDA STATUES, AND
	ICE FOR IMPROVEMENTS TO YOUR PROPERTY. A
NOTICE OF COMMENCEMENT MUS	ST BE RECORDED AND POSTED ON THE JOB SITE
BEFORE THE FIRST INSPECTION. I	F YOU INTEND TO OBTAIN FINANCING, CONSULT
WITH YOUR LENDER OR AN ATTO	RNEY BEFORE COMMENCING WORK OR
RECORDING YOUR NOTICE OF CO	MMENCEMENT.
Verification pursuant to Section 92.525. Flo	rida Statutes. Under penalties of perjury, I declare that I have -
	e true to the best of my knowledge and belief.
	trans to the broken of my missing and broken
	
Signature of Owner or Lessee, or Owner's or Lesse	
Signatory's Title/Officer:	
State of Florida	
County of Manatee	
	pefore me this day of, 20 by
	who is personally known to me or has produced
	, who is personary known to me or has produced, and who did/did not take an oath.
(Driver's License #)	, and who did did not take an oath.
(Direct 5 Dicelise π)	
	Signature of Notary
	Public - State of Florida
	Print, Type, or Stamp
	Commissioned Name of Notary Public