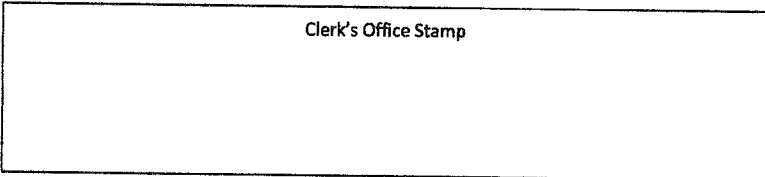


DocuSign Envelope ID: 0D25FE49-4316-430F-972B-EBDEDBED1956

NOTICE OF COMMENCEMENT



Tax Parcel Identification Number:

27-6S-17-09784-158

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*): LOT 58 SHADOW WOOD S/D UNIT 2. ORB 756-1532, 806-1868, CT 920-2530, 943-2429, WD 1059-1863.
a) Street (*job*) Address: 530 SE SHADOW WOOD DR LAKE CITY, FL 32024
2. General description of improvements: Tanner Construction Group will be building a 31x20 addition. The addition is comprised of a Dining Nook and Master Suite with full bathroom. We will add a new sub panel and upgrade the Air Conditioner to accommodate the new space.
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Cody Banner 530 SE SHADOW WOOD DR LAKE CITY, FL 32024
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
4. Contractor Information
a) Name and address: Christopher Tanner 18407 Nw 174th Dr. Suite D. Alachua, Fl. 32615
b) Telephone No.: 386-418-0001
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____
6. Lender
a) Name and address: _____
b) Phone No. _____
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 No.: _____
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: _____ OF _____
b) Telephone No.: _____
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 JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. 

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Cody Banner

Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, a Florida Notary,

this 31st day of March, 2023, by: Cody Banner as Homeowner
(Name of Person) (Type of Authority)

for _____ who is personally known OR produced identification
(name of party on behalf of whom instrument was executed)

Type ID _____

Notary Signature Jodie L Johnson (Notary Stamp or Seal)



JODIE L. JOHNSON
Notary Public
State of Florida
Comm# HH270973
Expires 6/25/2026