

1321

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NOTICE OF COMMENCEMENT

(PREPARE IN DUPLICATE)

Permit No. _____
State of FLORIDA

Tax Folio No. 29-45-17-08841-002
County of DUVAL

To whom it may concern:

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with Section 713 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

Legal description of property being improved: Part of Sec 29-45-17E

Address of property being improved: 687 SW Jones Terrace Lake City

General description of improvements: REMOVE AND REPLACE ROOF

Owner Veronica Dixon

Address 687 SW Jones Terrace Lake City FL 32055

Owner's interest in site of the improvement RE-ROOF

Fee Simple Titleholder (if other than owner)

Name _____

Address _____

Contractor GOLDEN ROOFING, INC.

Address 9471 BAYMEADOWS ROAD, SUITE 106; JACKSONVILLE, FL 32256

Phone No. (904) 730-0300

Fax No. (904) 683-4928

Surety (if any) _____

Address _____

Amount of bond \$ _____

Phone No. _____

Fax No. _____

Name and address of any person making a loan for the construction of the improvements.

Name _____

Address _____

Phone No. _____

Fax No. _____

Name of person within the State of Florida, other than himself, designated by owner upon whom notices or other documents may be served:

Name _____

Address _____

Phone No. _____

Fax No. _____

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.08 (2) (b), Florida Statutes. (Fill in at Owner's option).

Name _____

Address _____

Phone No. _____

Fax No. _____

Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

THIS SPACE FOR RECORDER'S USE ONLY

Inst 201212015776 Date 10/23/2012 Time 5:04 PM
DC, P DeWitt Cason, Columbia County Page 1 of 1 B 1243 P 1456

OWNER
Signed: Veronica N. Dixon DATE 8/17/12
Before me this 17 day of August 2012
County of Duval, State of Florida, has personally appeared
Veronica Dixon herein by
himself/ herself and affirms that all statements and declarations herein
are true and accurate
Notary Public State of Florida
Meghan Shellman
My Commission EE 202941
Expires 05/29/2016
Notary Public at Large, State of _____
My commission expires: _____
Personally Known _____ or
Produced Identification X _____