

31436

NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number:

26-35-16-02308-086

Inst:201412000415 Date: 1/10/2014 Time: 12:51 PM
DC, P DeWitt Cason, Columbia County Page 1 of 1 B 1268 P:200

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: 1218 FRONTIER DR.
2. General description of improvements: ROOF
3. Owner Information
a) Name and address: BRUCE GIBSON 1218 FRONTIER DR.
b) Name and address of fee simple titleholder (if other than owner): Lake City FL 32095
c) Interest in property: HOMEOWNER
4. Contractor Information
a) Name and address: S.E. ENERGY ROOFING TECH LLC
b) Telephone No: 386-867-4757 Fax No (Opt):
5. Surety Information
a) Name and address: N/A
b) Amount of Bond:
c) Telephone No: Fax No. (Opt.):
6. Lender
a) Name and address: N/A
b) Phone No:
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served
a) Name and address: N/A
b) Telephone No: Fax No (Opt):
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(f)(b) Florida Statutes
a) Name and address: N/A
b) Telephone No: Fax No (Opt):
9. Expiration date of Notice of Commencement (the expiration date is one 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 1, 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 Owner's Authorized Office/Director/Partner/Manager

BRUCE G. GIBSON
Printed Name

The foregoing Instrument was acknowledged before me, a Florida Notary, this 13th day of SEPTEMBER, 2013, by
BRUCE G. GIBSON as _____ (type of authority, e.g. officer, trustee, attorney
fact) for _____ (name of party on behalf of whom Instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature: Regina G. Timmons Notary Stamp or Seal:



REGINA G. TIMMONS
MY COMMISSION # EE 107715
EXPIRES, October 29, 2015
Bonded Thru Budget Notary Services

---AND---

11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief

Signature of Natural Person Signing (In line #10 above)

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