

NOTICE OF COMMENCEMENT

Permit No. _____

State of Florida _____
County of Columbia }

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.

Legal description of property (include street address, if available)

231 NW WEIGHTTY GLN, LAKE CITY 32-2S-16-01812-008 (5949)

General description of improvements Window Doors

Owner or Lessee if Lessee contracted improvement: John Smith

Address 231 NW Weighty Gln, Lake City, FL 32055

Interest in property: 100%

Fee Simple Title holder (if different from owner listed above):

Name _____

Address _____

Contractor Pete Cafaro

Address PO Box 781993 Orlando, FL 32878

Phone Number: 407-393-9161

Surety (attach copy of payment bond if applicable) NA

Phone Number: _____

Amount of Bond \$ _____

Any person making a loan for the construction of the improvements:

Name NA

Address _____

Phone Number: _____

Person within the State of Florida designated by the owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes:

Name NA

Address _____

Phone Number(s): _____

In addition to himself, owner designates _____ of _____

to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Phone Number of Designee: _____

Expiration date of Notice of Commencement – one (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 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

The undersigned having been duly sworn on oath states the above information is true and correct as (s)he is informed and believes.

X John B. Smith

Printed Name of Owner/Lessee

X John B. Smith

Signature of Owner/Lessee

STATE OF FLORIDA

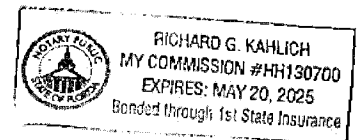
Ss }

Subscribed and sworn to before me this 17 day of Feb, 2023

Notary Public Signature

Printed Name

Personally Known ☒ OR Produced Identification ☐ ID Produced: _____



My Commission Expires