AFTER RECORDING - RETURN TO:

Inst: 202012010512 Date: 06/16/2020 Time: 9:15AM Page 1 of 1 B: 1413 P: 1280, P.DeWitt Cason, Clerk of Court Columbia, County, By: LK Deputy Clerk

PERMIT NUMBER:	
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NOTICE OF COMMENCEMENT

(segur deserth	tion of the property &	street address, if ava	ilable) TAX FOLI	O NO.: 08-65	S-17-09626-13
SUBDIVISION Tustenuggee Hills	BLOCK	TRACT	LOT 36	BLDG	UNIT
A.K.A 173 SW WIGWAM COURT,	FORT WHITE,	FLORIDA 32	038		
2. GENERAL DESCRIPTION OF IMPROVEMENT					
CONSTRUCTION FOR SINGLE HOME I	DWELLING				
3. OWNER INFORMATION OR LESSEE INFORM	IATION IF THE LESS	EE CONTRACTED	FOR THE IMPROV	EMENT:	
a. Name and address: GRACE M. RICHARE	OS				
b. Interest in property: OWNER					
. Name and address of fee simple titleholder (if different					
a. CONTRACTOR'S NAME: ERKINGER					
Contractor's address: 248 SE NASSAU S		and the second se	b. Phone numb	er: 386-45	7-5555
5. SURETY (if applicable, a copy of the payment bond	is attached):				
a. Name and address: N/A					
une and address: N/A oone number:					
6. a. LENDER'S NAME: N/A					
Lender's address:					
7. Persons within the State of Florida designal Section 713.13 (1) (a) 7., Florida Statutes:	ted by Owner upon	whom notices or o	ther documents r	nay be served	d as provided by
Name and address: N/A					
a. Name and address: N/A b. Phone numbers of designated persons:					

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

b. Phone number of person or entity designated by Owner: N/A

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 WITH YOUR LENDER OR AN ASTORNEY, BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

char (Sign e of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

Print Name and Provide Signatory's Title/Office)

(Fruit Name and Frovide Signatory's Title/

State of Florida County of Columbia

The foregoing instrument was acknowledged before me this <u>15</u> day of <u>June</u>, 20 <u>2D</u> by <u>GRACE M. RICHARDS</u> as <u>OWNER</u> (name of person) (type of authority,... e.g. officer, trustee, attorney in fact) Personally Known or Produced Identification Type of Identification Produced FLDL

	JULIE D. FLOYD Notary Public – State of Florida Commission # GG 165779 My Comm. Expires Dec 5, 2021	(Print, Type or Stamp Commissioned Name of Notary Public)
1	My Comm. Expires Dec 5, 2021 Bonded through National Notary Assr	

Rev. 10-15-12