



TOWN OF HILLIARD
15859 W CR 108 Hilliard, FL 32046
Phone: 904-845-3555 | cs@townofhilliard.com

Return to: (Enclose self-addressed stamped envelope)

Name: _____

Address: _____

Permit No. _____

Tax Folio No. _____

State of _____

County of _____

This Instrument Prepared by: _____

Name: _____

Address: _____

Property Appraisers Parcel Identification: _____

NOTICE OF COMMENCEMENT - FS 713.13

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Legal description of Property: _____

General description of Improvement: _____

Owner: Name and address: _____

a. Interest in property: _____

b. Name and address of fee simple titleholder (If other than Owner): _____

Contractor: Name and address: _____

a. Phone number: _____

Surety: Name and address: _____ Bond: \$ _____

a. Phone number: _____

Lender: Name and address: _____

a. Phone number: _____

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

Name and address: _____

a. Phone number: _____

In addition to himself, Owner designates _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.

a. Phone number: _____

Expiration date of Notice of Commencement (The expiration date is one (1) year from the date of recording unless a different date is specified): _____, 20____

State of Florida

County of _____

Signature of Owner

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____

Who is personally know to me or has produced _____ as identification.

(SEAL)

Notary Public