



**TOWN OF HYPOLUXO
BUILDING DEPARTMENT**

7580 S. Federal Highway
Hypoluxo, FL 33462-6034
Phone: 561.582.0510
Fax: 561.582.0703
Inspections: 561.582.0510
Email: hypoluxo@hypoluxo.org

NOTICE OF COMMENCEMENT

PERMIT # _____
TAX FOLIO # **26 - 43 - 45** - _____ - _____ - _____
STATE OF _____
COUNTY OF _____

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:

1. Description of Property:
A. Street Address _____
B. Legal Description _____

2. General Description of Improvement: _____

3. Owner Information:
A. Name _____
B. Address _____
C. Interest in Property _____
D. Name and Address of fee simple titleholder (if other than Owner): _____

4. Contractor Information:
A. Name _____ Phone # _____
B. Address _____

5. Surety:
A. Name _____ Phone # _____
B. Address _____
C. Amount of Bond: \$ _____

6. Lender:
A. Name _____ Phone # _____
B. Address _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:
A. Name(s) _____ Phone # (s) _____
B. Address(es) _____

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

9. Expiration date of notice of commencement (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 DATE 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 ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager _____ Signatory's Title/Office _____

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

by _____ as _____ for
Name of Person Type of authority, e.g. officer, trustee, attorney in fact

Name of party on behalf of whom instrument was executed

Signature of Notary Public – State of Florida _____ OR Produced Identification _____
Type of Identification Produced

Print, Type, or Stamp Commissioned Name of Notary Public

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 Above