

**Disclaimer: The forms provided on this website are intended only as GUIDELINES and are provided as examples of the type of form that may be used. The Clerk cannot advise whether a form is appropriate for your circumstance. To ensure that you are using the appropriate form and that it is completed correctly, The Clerk recommends that you seek legal counsel.**

**NOTICE OF COMMENCEMENT** TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 OR WHEN HEATING OR AIR CONDITIONING REPAIR OR REPLACEMENT EXCEEDS \$7500.00

Permit #: \_\_\_\_\_ Tax Folio #: \_\_\_\_\_

State of Florida, County of Indian River, The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Fla. Stat. the following information is provided in this Notice of Commencement.

Office Use Only

1. Legal description of the property (*and complete street address if available*):  
\_\_\_\_\_
2. General description of improvement:  
\_\_\_\_\_
3. Owner information or Lessee information (*if the Lessee contracted for the improvement*):
  - a. Name: \_\_\_\_\_
  - b. Address: \_\_\_\_\_
  - c. Interest in property: \_\_\_\_\_
  - d. Name & complete address of fee simple titleholder (if different from Owner listed above):  
\_\_\_\_\_
4. Contractor:
  - a. Name: \_\_\_\_\_
  - b. Address: \_\_\_\_\_
  - c. Phone number: \_\_\_\_\_
5. Surety Company (*if applicable, a copy of the payment bond is attached*):
  - a. Name & complete street address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_ Bond amount: \_\_\_\_\_
6. Lender/Mortgage Company:
  - a. Name & complete street address: \_\_\_\_\_
  - b. Lender's phone number: \_\_\_\_\_
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 & complete street address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_
8. In addition to himself or herself,
  - a. Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
  - b. Phone number: \_\_\_\_\_
9. Expiration date of notice of commencement: \_\_\_\_\_ (1 year from date of recording unless otherwise 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 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 Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

\_\_\_\_\_  
(Signatory's Title/Office)

Acknowledgement for Person in an Individual Capacity	Acknowledgement for Person in a Representative Capacity
State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20_____. by _____ who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal	State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20_____. by _____ (Name of Person) as _____ ( Explain Representative Capacity) for _____ (Name of Party on Behalf of Whom Instrument was Executed). who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal