Notice of Commencement Tax Folio # 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. Description of property: (legal description of the property, and street address if available) 2. General description of improvement: Owner's information or Lessee information if the lessee contracted for the improvement: 3. Address: Interest in property: Name and address of fee simple titleholder (if different from Owner listed above) Contractor's information: 4. Name: Email Address: Surety information: 5. _____ Fax ____ Phone Name: _____ Amount of Bond Address: Lender information: 6 ____ Phone ____ Fax ____ Name: Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as 7. provided by Section 713.13(1)(a)7., Florida Statutes: Phone ____ Fax ___ Name: Address: In addition to himself or herself, Owner designates the following person(s) to receive a copy of the Lienor's Notice 8 as provided by Section 713.13(1)(b), Florida Statutes.

Phone Fax

The City of Cape Coral and/or its agents, employees, officers, or other persons under its advisement and/or control neither makes nor shall be deemed to have made any warranty or representation, express or implied, concerning the accuracy of the information contained in the Notice of Commencement or for any other matter relating thereto. Further, the City of Cape Coral and/or its agents, employees, officers, or other persons under its advisement and/or control shall not be liable to any individual or entity with respect to the information contained therein or for any other matter relating thereto.

Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a

Commission Number:

Signature

Name:

Owner's Name

STATE OF

different date is specified). Date: _____

, COUNTY OF

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20__, by

Exp. Date:

who is personally known or produced as identification.

Signature of Notary Public:
Printed name of Notary Public:

9.