

Building Department

Town of Manalapan

***Information on Notice of Commencement***

A Notice of Commencement is required for the construction, improvement or alteration of real property. See ***Florida Statutes Title XL, Chapter 713*** for detailed information.

The Notice of Commencement shall be ***recorded*** in the office of the Clerk where the real property is located. A ***certified copy*** of the Notice of Commencement must be ***posted*** on the property. The property ***owner must sign*** the Notice of Commencement and ***no one else*** may be permitted to sign in his or her stead.

If the direct contract is greater than ***\$2,500.***, the applicant ***shall file with the Building Department***, prior to the first inspection, a ***certified copy of the recorded Notice of Commencement or a notarized statement*** that the Notice of Commencement has been filed for recording along with a copy thereof.

You may ***present the original certified copy or notarized statement in person*** to the Building Department; or you may ***fax the original certified copy or notarized statement to 561-585-9498***; or you may ***e-mail the original certified copy to [alynch@manalapan.org](mailto:alynch@manalapan.org)***.

***This Notice does not apply to a direct contract to repair or replace an existing heating or air-conditioning system in an amount less than \$7,500.***

The ***expiration*** date of a Notice of Commencement will be ***1 year*** from the date of recording ***unless a different date*** is specified on the notice.

Revised May 2018

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Instrument Prepared By:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

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** (Legal description of the property & street address, if available) **TAX FOLIO NO (PCN):** \_\_\_\_\_

**Legal Description** \_\_\_\_\_  
\_\_\_\_\_

2. **GENERAL DESCRIPTION OF IMPROVEMENT:** \_\_\_\_\_

3. **OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

a. Name and address: \_\_\_\_\_

b. Interest in property: \_\_\_\_\_

c. Name and address of fee simple titleholder (if different from Owner listed above): \_\_\_\_\_

4. a. **CONTRACTOR'S NAME:** \_\_\_\_\_

Contractor's address: \_\_\_\_\_ b. Phone number: \_\_\_\_\_

5. **SURETY** (if applicable, a copy of the payment bond is attached): a. Amount of bond: \_\_\_\_\_ b. Phone number: \_\_\_\_\_

c. Name and address: \_\_\_\_\_

6. a. **LENDER'S NAME:** \_\_\_\_\_

Lender's address: \_\_\_\_\_ b. 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 and address: \_\_\_\_\_

b. Phone numbers of designated persons: \_\_\_\_\_

8. a. In addition to himself or herself, 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 of person or entity designated by Owner: \_\_\_\_\_

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_\_\_

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)

\_\_\_\_\_  
(Print Name and Provide Signatory's Title/Office)

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization,

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ by \_\_\_\_\_,  
(name of person)

as \_\_\_\_\_ for \_\_\_\_\_  
(name of party on behalf of whom instrument was executed) (type of authority...e.g. officer, trustee, attorney in fact)

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_ Type of Identification Produced \_\_\_\_\_

Notary

\_\_\_\_\_  
(Signature of Notary Public)  
(Print, Type, or Stamp Commissioned Name of Notary Public)