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| PREPARED BY & RETURN TO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​Iconic Title Agency LLC​​1815 Lakewood RoadSuite 127Toms River, NJ 08755​​File No.  |  |
| Permit Number: ​​  | Tax Folio No: \_\_\_\_\_\_​​ |

**NOTICE OF COMMENCEMENT**

State of New Jersey​​

County of Ocean​​

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**: ​​

 Tax Folio No.: \_\_\_\_\_\_​​

 For Legal Description, see Exhibit “A” attached hereto and made a part hereof.

2. **GENERAL DESCRIPTION OF IMPROVEMENT**:  ​​

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

(a) Name and address:  ​​

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(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) Name and Address:  ​​

(b) Phone number:  ​​

(c) Amount of bond: $ ​​

6. (a) **LENDER’S NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​

 Lender’s 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 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): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_​​

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.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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| STATE OF NEW JERSEYCOUNTY OF OCEANOn 9th day of June, 2021, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Notary Public in and for said county, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who has/have satisfactorily identified him/her/themselves as the signer(s) or witness(es) to the above-referenced document.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Notary Public SignatureMy Commission Expires:​​ |

Verification pursuant to Section 92.525, Florida Statutes.

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)​​

Notice is hereby given pursuant to Section 713.135 Florida Statutes that a Notice of Commencement has been filed for recording for the property whose legal description is:

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Iconic Title Agency LLC​​

By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​

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| --- |
| STATE OF On \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Notary Public in and for said county, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who has/have satisfactorily identified him/her/themselves as the signer(s) or witness(es) to the above-referenced document.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Notary Public SignatureMy Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_​​ |