

# INSTRUCTIONS FOR NOTICE OF COMMENCEMENT

2800 N. HORSESHOE DR., NAPLES, FL 34104 | TEL: (239) 252-2400

These Instructions guide the Permittee through completing the Notice of Commencement form. The Notice is available on <http://www.colliercountyfl.gov/buildingapplications> as a downloadable interactive PDF form. Save a copy on your hard drive and fill it in. **All sections of the Notice of Commencement must be completed; if a response does not apply, mark N/A. Please do not submit these instructions with your completed form.**

## Instructions for Permit and Parcel/Folio Numbers

- A Permit #** - insert the Permit Number, which can be found on the Permit Application for improvements.
- B. Parcel/Folio #** - the Parcel and Folio numbers can be found on the Collier County Property Appraiser website: <http://www.collierappraiser.com>.

## Instructions for Section B. General Permit Information

- 1 Description of Property** - insert legal description (required), and street address (if available), of the property being improved. Legal descriptions can be found on the Collier County Property Appraiser website <http://www.collierappraiser.com>. Property Description must match the description on the Permit Application.
- 2. General Description** - insert a description of the improvements taking place. The description must be work scope specific and match the Permit.
- 3. Owner Information** - enter the owner's information, *(or enter Lessee's Information if the Lessee is the person who contracted the improvement)*. Include name, address, interest in the Property, and name and address of Fee Simple Titleholder *(if different from Owner listed above)*.
- 4. Contractor Information** - enter the Contractor's Name, Address, and Phone Number.
- 5. Surety** - check "Yes" or "No". Information is needed if applicable. Include a copy of the payment bond as an attachment. Provide Surety name, address, phone number, and amount of bond. If none, check "N/A".
- 6. Lender Information** - insert Lender name, address, and phone number, if applicable. If none, check "N/A".
- 7. Person(s) to be Noticed** - include Persons within the State of Florida Designated by Owner to be served with Notices or other documents as provided by Section 713.13 (1)(a)7. Insert the name(s), address(es), and phone number(s) of designated person(s). If none, check "N/A".
- 8. Owner Designee** - add person whom Owner designates (in addition to him/herself) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes, by inserting their name and phone number. If none, check "N/A".
- 9. Expiration Date** - insert the expiration date of the Notice of Commencement *(the expiration date may not be before the completion of construction and that payment to the contractor, and will be 1 year from the date of recording unless a different date is specified)*.

## Instructions for Notary

**Notary** – the Notary must complete all areas of the acknowledgement, in full.

## Certified Copy Required

**Certified Copy** – only a CERTIFIED COPY of the Notice of Commencement will be accepted. Notices can be certified by the [Collier County Clerk of Circuit Court](#).



Growth Management Department

2800 N. Horseshoe Dr., Naples FL 34104 | 239-252-2400

Seal

# NOTICE OF COMMENCEMENT

State of FLORIDA  
County of COLLIER

- A. Permit No.** \_\_\_\_\_ **B. Parcel/Tax Folio No.** \_\_\_\_\_
- Description of Property (legal description of the property, and street address if available): \_\_\_\_\_
  - General description of improvement (must be work scope specific and match the Permit): \_\_\_\_\_
  - Owner information or Lessee information if Lessee contracted for the improvement: a. Name: \_\_\_\_\_  
b. Address: \_\_\_\_\_  
c. Interest in property: \_\_\_\_\_  
d. Name and address of fee simple titleholder (if different from Owner listed above): \_\_\_\_\_
  - Contractor information a. Name: \_\_\_\_\_  
b. Contractor's Address: \_\_\_\_\_  
c. Contractor's Phone Number: \_\_\_\_\_
  - Surety  Yes  No (if applicable, a copy of the payment bond is attached): a. Name: \_\_\_\_\_  
b. Address: \_\_\_\_\_  
c. Phone Number: \_\_\_\_\_  
d. Amount of Bond: \$ \_\_\_\_\_
  - Lender information a. Name: \_\_\_\_\_ b. Phone: \_\_\_\_\_  
c. Lender's Address: \_\_\_\_\_
  - 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. a. Name(s): \_\_\_\_\_  
b. Address: \_\_\_\_\_  
c. Phone Numbers of designated persons: \_\_\_\_\_
  - a. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_  
to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.  
b. Phone Number of person or entity designated by owner: \_\_\_\_\_
  - 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.

\_\_\_\_\_  
Signature of Owner or Lessee, or Lessee's Authorized  
Officer/Director/Partner/Manager

\_\_\_\_\_  
Signatory's Printed Name and Title/Office

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, by \_\_\_\_\_ (name of person) as \_\_\_\_\_ (type of authority, e.g. officer, trustee, attorney in fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

**CRYSTAL K. KINZEL, CLERK OF THE CIRCUIT COURT & COMPTROLLER**

\_\_\_\_\_  
(Signature of Deputy Clerk)

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)

\_\_\_\_\_  
(Printed Name of Deputy Clerk)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary)  
**Personally Known** \_\_\_\_\_ **OR Produced Identification** \_\_\_\_\_  
**Type of Identification Produced** \_\_\_\_\_