



## COMMUNITY DEVELOPMENT & BUILDING DEPARTMENT

506 W. BERCKMAN STREET

FRUITLAND PARK, FL 34731

PHONE: (352) 360-6727

FAX: (352) 360-6652

Email: [permits@fruitlandpark.org](mailto:permits@fruitlandpark.org)

### Windows/Doors Permit Checklist

1. A COMPLETED SIGNED AND NOTARIZED PERMIT APPLICATION
2. SET OF PLANS APPROVED BY THE STATE OF FLORIDA/ENGINEER PLANS
3. PRODUCT APPROVAL
4. SITE PLAN SHOWING LOCATION OF ALL WINDOWS/DOORS
5. A NOTICE OF COMMENCEMENT MUST BE RECORDED WITH LAKE COUNTY AND DISPLAYED UPON FIRST INSPECTION. <https://cdn.lakecountyfl.gov/media/lbrbgx41/bf29-notice-of-commencement-ada.pdf>  
(Email a copy of the recorded NOC to [PERMITS@FRUITLANDPARK.ORG](mailto:PERMITS@FRUITLANDPARK.ORG) )
6. AN OWNER BUILDER DISCLOSURE **IF PERMIT IS APPLIED FOR BY THE OWNER**
7. PROOF OF PROPERTY OWNERSHIP; PROPERTY RECORD CARD or WARRANTY DEED  
( Property record card can be found at <https://www.lakecopropappr.com/> )
8. FOR INSPECTION; VIRTUAL INSPECTION AFFIDAVIT AND PICTURES
9. COPY OF ANY ARC, ARB, OR HOA APPROVAL , IF APPLICABLE.

PLEASE REQUEST INSPECTIONS BY SENDING AN EMAIL TO [PERMITS@FRUITLANDPARK.ORG](mailto:PERMITS@FRUITLANDPARK.ORG)  
INSPECTIONS WILL BE PROCESSED AS QUICKLY AS POSSIBLE, TYPICALLY THE NEXT BUSINESS DAY.

*\*Please note that this checklist is not intended to be all-inclusive. Due to changes in codes, regulations, and ordinances, other requirements may apply.*

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities, such as water management districts, state agencies, or federal agencies.

# Windows/Doors Permit

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------|----------|--|
| To Schedule An Inspection -<br>email: <a href="mailto:permits@fruitlandpark.org">permits@fruitlandpark.org</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | <b>Permit<br/>Application</b> |  | <b>NOTICE:</b> In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities, such as water management districts, state agencies, or federal agencies. |            | Permit Number  |          |  |
| You must submit 1 notarized copy if signed prior to coming to City Hall or <a href="mailto:permits@fruitlandpark.org">permits@fruitlandpark.org</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                               |  | Project Address                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  | Project Description                                                                                                                                                                                                                                                                                                                             |            |                |          |  |
| Property ID Key/Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                               |  | Parcel Number                                                                                                                                                                                                                                                                                                                                   |            |                |          |  |
| Owner's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | Email Address  |          |  |
| General Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | GC License #   |          |  |
| Construction Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | CC License #   |          |  |
| Electrical Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | EC License #   |          |  |
| Plumbing Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | PC License #   |          |  |
| HVAC Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Mailing Address               |  | City, State, Zip                                                                                                                                                                                                                                                                                                                                |            | Telephone      |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            | HVAC License # |          |  |
| <div style="display: inline-block; width: 45%;">Commercial</div> <div style="display: inline-block; width: 45%;">Residential</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Legal Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Bonding Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Bonding Company Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Architect's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Architect's Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Project Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Flood Zone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Setbacks Provided over Required (ft)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Front                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Rear                          |  | Side                                                                                                                                                                                                                                                                                                                                            |            | Corner         |          |  |
| Project                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Area                          |  | Electrical                                                                                                                                                                                                                                                                                                                                      | Hvac       | Water          |          |  |
| New                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Living                        |  | Service Size                                                                                                                                                                                                                                                                                                                                    | Type       | Municipal      |          |  |
| Alteration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Garage                        |  |                                                                                                                                                                                                                                                                                                                                                 |            | Well           |          |  |
| Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Porch(s)                      |  |                                                                                                                                                                                                                                                                                                                                                 | Efficiency |                | Plumbing |  |
| Repair                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Other                         |  |                                                                                                                                                                                                                                                                                                                                                 | Airhandler |                | Sewer    |  |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Total                         |  |                                                                                                                                                                                                                                                                                                                                                 | Condenser  |                | Septic   |  |
| Garage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Number of Bedrooms            |  |                                                                                                                                                                                                                                                                                                                                                 |            | Code In Effect |          |  |
| Attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Detached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Applicant Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Date                          |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| <p style="font-size: 0.8em;">WARNING TO OWNER: Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement. The issuance of a building permit does not assure the building setbacks have been met or that the structure does not encroach on an easement. The owner and/or contractor have the sole responsibility of determining compliance with setbacks and non-encroachment of easements. Permits expire 6 months after issuance. You are responsible for the completion of the permit, inspections, and all Re-Inspection Fees.</p> |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| <p>The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification and who did ____ or did not ____ take an oath.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| <p>(Seal)<br/>Notary Public</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |
| Revised & Approved 9/13/2021                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                               |  |                                                                                                                                                                                                                                                                                                                                                 |            |                |          |  |



## Community Development

Address 506 West Berckman Street

Fruitland Park, Florida 34731

Phone Number 352.360.6727

Email [permits@fruitlandpark.org](mailto:permits@fruitlandpark.org)

## Product Approval Form

All plans submitted for plan review must include information meeting the requirements of Florida Statutes 553.842, and Florida Administrative Code 9B-72 for eight product groups:

- |           |                 |           |                                                                                 |
|-----------|-----------------|-----------|---------------------------------------------------------------------------------|
| •Window   | •Exterior Doors | •Shutters | •Structrural Components                                                         |
| •Skylight | •Panel Walls    | •Roofing  | •New Building Envelope Products<br>(affecting structural integrity of building) |

Florida product approval numbers may be obtained from suppliers or by visiting the Department of Community Affairs' Florida Building Code website at [www.floridabuilding.org](http://www.floridabuilding.org). Use the Product Approval link to search for current approved products.

| Product Type | Approval Number | Manufacturer & Description |
|--------------|-----------------|----------------------------|
|              |                 |                            |
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Note: This document was reviewed for code compliance, this does not relieve the applicant from correcting errors and omissions and complying with the current Florida Building Code.



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### Owner Builder Disclosure Statement

*(Not applicable for properties owned by a Corporation per F.S. 489.103(7))*

**(Initial to the left of each statement)**

\_\_\_ 1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

\_\_\_ 2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

\_\_\_ 3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.

\_\_\_ 4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

\_\_\_ 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

\_\_\_ 6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

\_\_\_ 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

\_\_\_ 8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

\_\_\_ 9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

\_\_\_ 10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or <https://www.contractorlicensing.com/florida/contractors-licenses.html> for more information about licensed contractors.

\_\_\_\_11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

---

**Address of Proposed Construction**

\_\_\_\_12. I agree to notify City of Fruitland Park immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

**State of Florida**

**County of** \_\_\_\_\_

The Foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, by

- \_\_\_\_\_ who is personally known to me or has produced

- \_\_\_\_\_ as identification and who did or did not take an oath

(Notary Seal)

**Notary Public - State of Florida**

**Commission No** \_\_\_\_\_

**My Commission Expires** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name



COMMUNITY DEVELOPMENT & BUILDING DEPARTMENT  
506 W. BERCKMAN STREET  
FRUITLAND PARK, FL 34731  
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### Virtual Inspection Program

**Background** – Due to the recent COVID-19 pandemic and social distancing guidelines, we have developed the virtual inspection program. This program is designed to limit the contact to our homeowners and inspection staff by using technology to assure code compliant installations. For now, the program is limited in scope based on existing technology. As technology expands, we will seek to add more inspections to the list.

### Overview

**Affidavit** – must be signed by the licensed holder or someone with a valid POA.

**Pictures with location information** – we will accept pictures that have their location information provided. This can be found in the file information when you open the pictures on your computer. You will have to enable location services on your phone in order to have your phone tag the photos with the location information. Please educate yourself on this process to avoid submitting photos with no location information. Pictures submitted without location information will not be accepted.

**Pictures in the format as prescribed for each inspection type**- Please make sure you pay attention to the various picture requirements for certain inspection types.

**Submittal** – please email in your request along with the pictures or a link to the pictures. [Permits@Fruitlandpark.org](mailto:Permits@Fruitlandpark.org) . Be sure the subject line says virtual inspection. It may take a few emails to get all of the pictures submitted. Please do not compress or zipfile the submittals. You are welcome to include a cloud storage link to the photos.

**Inspection** – The inspection should take place within 24 hours and the results will be emailed back to the email address where the inspection was requested.

**Applications** – Please download the appropriate application with each permit type listed below. This form is meant as supplemental information, not to be confused with a complete application.

## Affidavit for Virtual Inspections

I \_\_\_\_\_ a duly licensed contractor in the State of Florida with license number \_\_\_\_\_ do hereby attest to the fact that the pictures that accompany this affidavit represent the true nature of the work performed at \_\_\_\_\_ with permit number \_\_\_\_\_. I also fully understand that intentionally sending in photos of work that is not representative of the work as described above, or by falsifying any of the data associated with this inspection is a punishable offense with DBPR.

\_\_\_\_\_  
Signature of Contractor

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification and who did \_\_\_\_\_ or did not \_\_\_\_\_ take an oath.

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

\_\_\_\_\_  
Print, type or Stamp Commissioned Name of Notary Public





COMMUNITY DEVELOPMENT & BUILDING DEPARTMENT  
506 W. BERCKMAN STREET  
FRUITLAND PARK, FL 34731  
PHONE: (352) 360-6727  
FAX: (352) 360-6727  
Email: [permits@fruitlandpark.org](mailto:permits@fruitlandpark.org)

### **Garage Door Picture Checklist**

- Show a picture of the garage door from the outside that includes enough of the house to determine that it matches the house from our Google Street View
- Show a picture of the garage door wind rating sticker/pressure sticker
- Show the spacing of the track to buck and the spacing of each one

### **AC Picture Checklist**

- Make sure location services are enable on your mobile device
- Show a picture of the nameplate rating for the airhandler
- Show a picture with the appropriate overcurrent device marked on the airhandler
- Show that the condensate lines are properly installed with overflow sensor installed
- Show the overcurrent devices in the electrical panel and that they are properly labelled
- Show the name plate label for the condensing unit
- Show that the unit is placed 4" above grade
- Show that the locking freon caps are installed
- Show that the lineset is UV protected and protected from physical damage

### **Doors/Windows**

- Show typical fastener spacing with enough clarity that it can be verified against the product approval installation requirements
- Show any tempered glass etching where tempered glass is required
- Egress windows; show them in the fully opened position along with the measurements.
- Show at least one door and one window picture from the exterior with caulking installed to verify whether tightness of the product installation
- If substrate installation is required, please show at least one picture of the substrate installation per the approved engineering

### **Water Heater Changeout**

- Show a profile view of the water heater with clear view of drain pan (if required), relief line and shutoff valve
- Show electrical connection properly terminated with the correct sized conductors
- Show name plate rating of water heater
- Show breaker size with panel properly labelled

### **Screen Infill**

- Show profile view of installation
- Show typical fastener spacing of 1x2 to substrate
- Show typical fastener connection of uprights to top and bottom substrate
- Show a picture of the fastener against a tape measure so we can verify the length

After recording, return to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Permit No.: \_\_\_\_\_  
Tax Folio No.: \_\_\_\_\_

## Notice of Commencement

State of Florida | County of Lake

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 the Property: *(legal description of the property and street address if available)*

Legal Description: \_\_\_\_\_

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

2. General Description of Improvement

3. Owner's Information or Lessee information if the lessee contracted for the improvement:

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

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

Interest in Property: \_\_\_\_\_

Name & Address of fee simple titleholder *(if different than owner)*: \_\_\_\_\_

4. Contractor Information

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

5. Surety *(if applicable, a copy of the payment bond must be attached)*:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_ Amount of Bond: \$ \_\_\_\_\_

6. Lender Information:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

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:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

8. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_  
to receive a copy of the following Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: Phone No.: \_\_\_\_\_

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 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*

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_, as \_\_\_\_\_ for \_\_\_\_\_ who

\_\_\_\_\_  
*Type of authority (i.e. officer, trustee, attorney in fact)*

\_\_\_\_\_  
*Name of party on behalf of whom instrument was executed*

is personally known or produced \_\_\_\_\_ as type of identification.

\_\_\_\_\_  
*Signature of Notary Public – State of Florida (print, type or stamp commissioned name of Notary Public)*