

Permit No. _____
Tax Folio No. _____

NOTICE OF TERMINATION OF NOTICE OF COMMENCEMENT

STATE OF _____
COUNTY OF _____

THE UNDERSIGNED hereby gives notice of termination of the Notice of Commencement recorded in Official Records Book _____ Page _____ the public records of _____ County, Florida. The Notice of Commencement is terminated as of the _____ day of _____, _____ or thirty days after this Notice of Termination of Notice of Commencement is recorded, whichever is later. This Notice applies to: all of the real property described in paragraph 1 or that part of the real property described as follows:

(insert legal description of property and street address, if available)

All lienors have been paid in full.

The Owner, before recording this Notice of Termination of Notice of Commencement, served a copy on the Contractor and on each Lienor giving notice pursuant to Chapter 713, Florida Statutes.

1. Description of property (legal description and address, if available): _____

2. General description of improvement:

3. Owner information:
 - a) Name and address: _____

 - b) Interest in property: _____
 - c) Name and address of fee simple title holder (if other than Owner): _____

4. Contractor (name and address): _____

5. Surety: _____
 - a) Name and address: _____

 - b) Amount of bond: \$ _____
6. Lender (name and 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 and address) _____

8. In addition to himself, Owner designated _____ (name) of _____ (address) to receive a copy of the Lienor's Notice as provided in section 713.13(1)(b), Florida Statutes.
9. Expiration date of notice of commencement: _____

(Owner)

By: _____

Print Name: _____

Print Title: _____

Address: _____

STATE OF _____
COUNTY OF _____

Before the undersigned Notary Public, personally appeared _____ by the means of _____ physical presence or _____ online notarization and is personally known to me or who has produced identification _____. Given under my hand and official seal this ___ day of _____, 20__.

(Signature)

(Printed Name)

NOTARY PUBLIC, STATE OF _____

My Commission Expires: _____

Prepared by:
