

Prepared by/Return to:

Building Permit No. _____

Tax Folio No. _____

SPACE ABOVE RESERVED FOR RECORDER USE

NOTICE OF TERMINATION OF NOTICE OF COMMENCEMENT
(Fla. Stat. §713.132)

STATE OF FLORIDA

COUNTY OF _____

The undersigned hereby gives notice that the effective period of the Notice of Commencement dated ____/____/20____, and recorded in the Official Record Book/Page _____/_____ of the Public Records of _____ County, Florida will terminate. In accordance with Florida Statutes §713.132, the following information is provided

1. Description of the Property:

2. General Description of Improvements:

3. Owner Information

Name: _____

Address: _____

Interest in Property: _____

4. Owner Designee (if any)

Name: _____

Address:

5. Contractor Information

Name: _____

Address:

6. Surety Information (if any)

Name: _____

Address:

Amount of Bond:

\$ _____

7. Lender Information (if any)

Name: _____

Address:

8. The Notice of Commencement shall be terminated as of ____/____/20____, or 30 days from the recording of this Notice of Termination; whichever is earlier.

9. This Notice of Termination applies to:

- All of the real property subject to the above-described Notice of Commencement.
- Only the portion of such real property described as:

10. To the best of the Owner’s knowledge, all lienors have been paid in full.

11. Prior to the recording of this Notice of Termination, Owner has provided a copy of such notice to the Contractor and anyone who has provided Owner or its designee with a Notice to Owner as provided in Fla. Stat. §713.06(2)(c)(d).

Owner Signature

Printed Name

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of [] physical presence, or [] online
 notarization, this ____ day of _____, 20____, by
 _____, [] personally known, or [] produced
 _____ as identification.

Notary Signature

Printed Name

Commission expires: _____

(SEAL)