

Tax Parcel Number _____

TERMINATION OF NOTICE OF COMMENCEMENT

State of Florida County of Volusia

The UNDERSIGNED hereby gives notice of Termination of Notice of Commencement recorded on _____, in Official Records

Book _____ Page _____ of the Public Records of Volusia County, Florida and in accordance with Chapter 713.132, Florida Statutes, the

following information is provided in this Notice of Termination:

1. Description of Property: (legal description of the property, and street 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 titleholder (if other than owner)
4. a. Contractor's Name and address:
 - b. Contractor's phone number:
5. Surety (if applicable):
 - a. Name and address
 - b. Phone number
 - c. Amount of bond \$ _____
6. a. Lender Name and 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, 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: _____
9. The Notice of Commencement is terminated as of _____ or 30 days from the recording date of this Notice of Termination, whichever is later.
10. This notice of Termination applies to:
☐ All the real property subject to the Notice of Commencement
☐ Only to the portion of such real property described as: _____

11. All lienors have been paid in full or prorata in accordance with Section 713.06(4), Florida Statutes.
12. A copy of this notice has been served on the contractor and on each lienor who has given notice, if any.

Signature of Owner

Owner's printed or typed name

State of _____, County of _____

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this _____ day of _____ 20____.

By _____ who is personally Known _____ **OR** produced
_____ as identification.

Exhibit attached:

☐ Contractor's Final Payment Affidavit

(Signature of Notary Public) (print, type, or stamp commissioned below)