



CITY OF DORAL
RECORD (MASTER) COPY
TRANSMITTAL FORM

OFFICE OF THE CITY CLERK
Page 1 of 1

Transmittal From: Parks & Recreation
Department

Delivered by: Maggie Santos
Name

Date of Transmittal: 7/20/11

City Clerk's Date Stamp

07-20-11A09:18 RCVD

The following record (master) copy is being transmitted to the Office of the City Clerk:

- Contract
- Agreement
- Lease
- Deed
- Bond Documentation
- Vehicle Title
- Special Magistrate Order
- Other: Notice of Commencement

Is this record (master) copy to be recorded with the County Clerk? Yes No

Description of Record Copy:

Notice of Commencement - Volleyball Court Lighting

Office of the City Clerk Administrative Use Only

Received by: Yamiletta Pereyra

Reviewed for completion by Yamiletta Pereyra

Returned to originating Department for the following corrections on _____
Date

Archived in the Office of the City Clerk on 7/20/2011 (Date)

Copy provided in electronic format to originating Department on 7/20/2011 (Date)

NOTICE OF COMMENCEMENT

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION



CFN 2011R0448732
OR Bk 27749 Pg 1628; (1pg)
RECORDED 07/08/2011 11:22:29
HARVEY RUVIN, CLERK OF COURT
MIAMI-DADE COUNTY, FLORIDA
LAST PAGE

PERMIT NO. 2011-01094 TAX FOLIO NO. 35.3020.000.0050

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

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. Legal description of property and street address: Morgan Levey Park 5300 NW 102nd Ave Doral, Florida 33178

2. General description of improvement: Install 2 Light Poles and Electrical Wiring for Light Poles

3. Owner(s) name and address: City of Doral 8300 NW 53rd Street, Doral FI, 33166

Interest in property: City Park

Name and address of fee simple titleholder (if other than owner): _____

4. Contractor's name, address, and phone number: Davco Electrical Contractors Corp.
4885 Park Ridge Blvd. Boynton Beach, Florida 33426 561-732-3434 Attn: Joseph C Goater Sr Project Manager

5. Surety: (Payment bond required by owner from contractor, if any)

Name and address: Arch Insurance Company, 3 Parkway Ste. 1500, Philadelphia, PA. 19102

Amount of bond: \$ \$47,292.00

6. Lender's name, address, and phone number: N/A

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, address, and phone number: _____

8. In addition to himself or herself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:

Name, address, and phone number: Davco Electrical Contractors Corp. 4885 Park Ridge Blvd. Boynton Beach, FL. 33426

9. Expiration date of the Notice of Commencement (the expiration date is 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 1, 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 Owner's Authorized Officer/Director/Partner/Manager _____ Signatory's Title/Office _____

ALBERT ACEVEDO
Print Name

The foregoing instrument was acknowledged before me this 6th day of July, 2011, by Albert Acevedo as Project Manager (type of authority, e.g. officer, trustee, attorney in fact) for City of Doral (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification _____ Type of Identification Produced: _____

Maggie Santos
Signature of Notary Public - State of Florida

Print, Type, or Stamp
Commissioned Name
of Notary Public: MAGGIE SANTOS
MY COMMISSION #DD698942
EXPIRES: JUL 25, 2011
Bonded through 1st State Insurance



VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES.

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing Above _____

Turn Over for Instructions

