CONTRACTOR’S FINAL AFFIDAVIT

& RELEASE OF LIEN

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who after first being duly sworn, deposes and says:

1. He is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 which does business in the State of Florida (hereinafter called “Contractor”).

1. Contractor, pursuant to the Contract dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereinafter referred to as the “Contract”) with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereinafter referred to as the “Owner”), has heretofore furnished or caused to be furnished labor, materials and services for the construction of certain improvements as more particularly set forth in the Contract.
2. Contractor represents that all work to be performed under the Contract has been duly completed and that all lienors under the direct contract have been paid in full, except the following:

Name Amount Due

**NONE**

1. In consideration of final payment to the Contractor in the amount of ZERO and all other previous payments paid by the Owner to the Contractor, the undersigned does hereby waive, release and relinquish the Contractor’s right to any claim or demand or right to impose a lien or liens for work done or materials or services furnished or any other class of lien whatsoever, on any of the property owned by Owner on which improvements have been completed in connection with the aforementioned Contract.
2. The undersigned represents that he/she has the authority to execute a full and final release of lien for an in behalf of the Contractor.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature of Affiant - Contractor)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Printed Name of Affiant - Contractor)

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 Identification ☐

Type of Identification Produced: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Notary Public, State of Florida
Name:
My Commission Expires:
My Commission Number is:

NOTICE OF TERMINATION

Building Permit No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tax Folio No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 The undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as fee simple owner, pursuant to Section 713.132, Florida Statutes, hereby gives Notice of Termination of the Notice of Commencement dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and recorded on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, in O. R. Book \_\_\_\_\_\_\_\_ Page \_\_\_\_\_\_\_\_\_, of the Public Records of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, Florida.

1. Said Notice of Commencement contains the following information:
2. Description of Property: (legal description of the property and street address if available)
3. General Description of Improvements:
4. Owner Information:
5. Name and Address:
6. Interest in Property:
7. Name and Address of Fee Simple Titleholder (if other than owner):
8. Contractor Name and Address:

Phone number:

1. Surety Name and Address:

Phone Number:

Amount of Bond: $

1. Lender Name and Address:

Phone Number:

1. Persons within the State of Florida designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes: (names and addresses)

Phone Number(s):

H. In addition to himself/herself, Owner designates \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to receive a copy of the Lienor’s Notice to Owner as provided in section 713.13(1) (b), Florida Statutes.

 Phone number of designated person or entity:

 I. Expiration date stated on Notice of Commencement, if any so stated on the Notice of Commencement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. The Notice of Commencement shall be terminated pursuant to this Notice 30 days after this Notice of Termination is recorded.
2. This Notice of Termination applies to all real property subject to the Notice of Commencement except:
3. As of the date of this Notice of Termination, construction has been completed.
4. Attached hereto and made a part hereof is the Contractor’s Affidavit evidencing that all lienors have been paid in full for the labor, services and materials performed in completion of their contracts with the General Contractor.
5. Owner has, before recording this Notice of Termination, served a copy of the Notice of Termination on the Contractor and each lienor who has given a notice to owner, except for any lienor who has executed a waiver and release of lien upon final payment in accordance with section 713.20, Florida Statutes, and on each lienor who had a direct contract with the owner.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Owner)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Printed Name of Owner)

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 Identification ☐

Type of Identification Produced: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public, State of Florida
 Name:
 My Commission Expires:

 My Commission Number is:

INDEMNITY AGREEMENT

WFG NATIONAL TITLE INSURANCE COMPANY will be issuing its title insurance for the land described WFG Commitment Nr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 (“Property”)

Title to the real property to be insured is subject to the following notice of commencement (describe Book and Page where NOC recorded):

(“NOC”)

WFG has been requested to insure title to Property without exception for the NOC or liens that may be filed after the date of the policy but have priority as of the date of the recording of the NOC. The undersigned agrees as follows:

1. To indemnify and hold WFG harmless from any and all liens, lawsuits, and all other matters arising directly or indirectly from work performed on the Property pursuant to the project described in the NOC.
2. To defend at their expense the Property and all parties insured by WFG to own or have a mortgage on the Property against any litigation, claims or any other matter brought against the Property for all matters arising directly or indirectly from work performed on the Property pursuant to the project described in the NOC; and hold WFG harmless from all attorney fees and court costs arising directly or indirectly from the foregoing.
3. To pay and obtain a release of any liens filed against the Property arising directly or indirectly from work performed on the Property pursuant to the project described in the NOC as soon as possible after being notified of said liens.

 This \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

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 Identification ☐

Type of Identification Produced: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public, State of Florida

Name:
My Commission Expires:
My Commission Number is: