Notice of Commencement of Public Improvement

OhioDAS

Ohio Department of Administrative Services
General Services Division
State Architect's Office ▪ 4200 Surface Road ▪ Columbus, Ohio 43228-1395

http://ohio.gov/sao
StateArchOff@das.state.oh.us
Phone 614.466.4761

Notice is hereby given in accordance with Section 1311.252 Ohio Revised Code of the commencement of the Public Improvement identified as:

Project Name	Northcoast Behavioral Healthcare	Project Number	DMH-060178.01
Project Location	Campus Consolidation - McKee Bldg	Owner	Department of Mental Health
County	Summit	Date of Contract*	July 13, 2012

Public Authority

The Public Authority responsible for the Public Improvement is:

State of Ohio
Department of Administrative Services
General Services Division
State Architect's Office
4200 Surface Road
Columbus, Ohio 43228-1395

Designated Representative

The representative to whom service of an affidavit may be made pursuant to Section 1311.26 Ohio Revised Code is:

Sara Freetage
State of Ohio
Department of Administrative Services
General Services Division
State Architect's Office
4200 Surface Road
Columbus, Ohio 43228-1395

Affidavit

I certify or affirm that to the best of my knowledge, the information provided in this document is true and correct and that I am fully authorized to provide this Notice.

Affiant:
State Architect's Office

Lane J. Beougher, State Architect

Notary

The Affiant acknowledged and signed this instrument before me, a Notary Public in and for the County of FRANKLIN, State of Ohio.

[Seal] Sworn and subscribed before me this 25th day of July, 2012.

Notary Public

NOTARIAL SEAL STATE OF OHIO

Crystal A. Canan, Attorney At Law
NOTARY PUBLIC - STATE OF OHIO
My commission has no expiration date
Sec. 147.03 R.C.

List of Contractors and Sureties

Refer to following page(s).

*Date signed by Attorney General's Office

Notice of Commencement of Public Improvement continued OhioDAS

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Project Information

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Project Location	Campus Consolidation - McKee Bldg	Owner	Department of Mental Health

Contractor (attach additional pages as necessary)		**Surety**	
Name	Nerone & Sons, Inc.	**Name**	Travelers Casuality and Surety Company
Address 1	19501 S. Miles Road	Address 1	6150 Oak Tree Blvd.
Address 2		Address 2	
City, State ZIP	Warrensville, Ohio 44128	City, State, ZIP	Independence, Ohio 44131
Trade	General Trades		
Name		**Name**	
Address 1		Address 1	
Address 2		Address 2	
City, State ZIP		City, State ZIP	
Trade			
Name		**Name**	
Address 1		Address 1	
Address 2		Address 2	
City, State, ZIP		City, State, ZIP	
Trade			
Name		**Name**	
Address 1		Address 1	
Address 2		Address 2	
City, State ZIP		City, State ZIP	
Trade			
Name		**Name**	
Address 1		Address 1	
Address 2		Address 2	
City, State ZIP		City, State ZIP	
Trade			
Name		**Name**	
Address 1		Address 1	
Address 2		Address 2	
City, State ZIP		City, State ZIP	
Trade			