

# Notice of Commencement of Public Improvement

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

Ohio **DAS**

www.ohio.gov/sao  
e: StateArchOff@das.state.oh.us  
v: 614.466.4761 • f: 614.644.7982

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

Project Name	<u>Stark State College</u>	SAO Project No.	_____
	<u>Ophthalmology Lab</u>	Local No.	<u>SSC 16-003</u>
Project Location	<u>Jackson Township, Ohio</u>	Owner	<u>Stark State College</u>
County	<u>Stark</u>	Date of Contract*	<u>5/5/2016</u>

## Public Authority

The Public Authority responsible for the Public Improvement is:

Stark State College  
6200 Frank Avenue N.W.  
North Canton, OH 44720

## Designated Representative

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

Thomas A. Chiappini  
Vice of Business and Finance  
6200 Frank Avenue N.W.  
North Canton, OH 44720

## 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:  
Stark State College

  
Thomas A. Chiappini  
Thomas A. Chiappini, Vice President for Business and Finance

## Notary

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

[Seal]

Sworn and subscribed before me this 24 day of May, 2016.

Marie E. Turkovich  
Notary Public



Marie E. Turkovich  
Resident Summit County  
Notary Public, State of Ohio  
My Commission Expires: 10/02/2017

## List of Contractors and Sureties

Refer to following page(s).

Prepared by  
John H. Jivens

\*Date signed by Attorney General's Office

# Notice of Commencement of Public Improvement continued Ohio **DAS**

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## Project Information

Project Name	<u>Stark State College</u>	SAO Project No.	<u>- -</u>
	<u>Ophthalmology Lab</u>	Local no.	<u>SSC 16-003</u>
Project Location	<u>Jackson Township</u>	Owner	<u>Stark State College</u>

Contractor (attached additional pages as necessary)	Surety
<b>Name</b> <u>St. Clair/Pavlis Group</u> <b>Address</b> <u>4100 Harrison Ave., N.W.</u> <b>City, State, Zip</b> <u>Canton, OH 44709</u> <b>Trade</b> <u>General Contractor</u>	<b>Name</b> <u>Cincinnati Insurance Company</u> <b>Address</b> <u>P.O. Box 145496</u> <b>City, State, Zip</b> <u>Cincinnati, OH 45250-5496</u>
<b>Name</b> _____ <b>Address</b> _____ <b>City, State, Zip</b> _____ <b>Trade</b> _____	<b>Name</b> _____ <b>Address</b> _____ <b>City, State, Zip</b> _____
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