

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Lyon Builders Inc. Date: 2-21-20
Site Address: ~~4052 Barbecue Church Rd.~~ Phone: 919-353-0720
Subdivision: N/A 684 CP Stewart Rd. Lot: 3
Description of Proposed Work: New Construction Total Job Cost: 200,000

General Contractor Information

Lyon Builders Inc. Telephone: 919-353-0370
Building Contractor's Company Name
2139 Barbecue Church Rd. Email Address: Lyon20@gmail.com
Address: Sanford NC 27332
56254 License #

Electrical Contractor Information

Description of Work: Electrical Service Size: 200 Amps T-Pole: Yes No
With Wester & Pace Electric
Electrical Contractor's Company Name Telephone: _____
614 Leslie Rd. Sanford, NC Email Address: _____
Address: 12007-4 27332
License #

Mechanical/HVAC Contractor Information

Description of Work: HVAC
Sandhills Heating & Refrigeration Telephone: 910-338-3723
Mechanical Contractor's Company Name
9206 Aberdeen Rd. Aberdeen, NC Email Address: _____
Address: 30377 28315
License #

Plumbing Contractor Information

Description of Work: Plumbing # Baths: 2
McDonald Plumbing Telephone: 919-770-0773
Plumbing Contractor's Company Name
5321 Swains Station Rd. Email Address: _____
Address: 11824 Sanford, NC 27332
License #

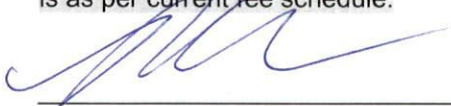
Insulation Contractor Information

Tri-City Insulation Telephone: _____
Insulation Contractor's Company Name & Address

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.



Signature of Owner/Contractor/Officer(s) of Corporation

2-21-20
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title:



President

Date:

2-21-20