

Application # SFD2004 - 6076

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

ion on license.	
Owner's Name: Lyon Duilders Inc.	Date: 7-6-20
Owner's Name: Lyon Dunlders Inc. Site Address: 4641 NC 27 W Lillington NO	Phone: 919-353-057
Description of Proposed Work: New Constructy	Lot:
General Contractor Information	1 6
Lyon Builders Inc.	919-35 3-0370
Building Contractor's Company Name	Telephone
Building Contractor's Company Name 2139 Barbecse Church Rd. NC27312 Address	Email Address
5675 Y License #	
Description of Work Electrical Contractor Information	n 2000 Amps T-Pole: Yes No
Wester + Pace Electric	200 / Mips 1 Fole 103 10
Electrical Contractor's Company Name	Telephone
Address	Email Address
12007-9 License #	
Mechanical/HVAC Contractor Inform	ation
Description of WorkHVAC	
	910-20-3723
Sandhills Harty + Petryleration Mechanical Contractor's Company Name	Telephone
	,2 ×
Address	Email Address
30377	
License # Plumbing Contractor Information	
1/1. //	# Baths 2
McDona (d Dewh) Plumbing Contractor's Company Name	9/9e770-0773 Telephone
Address	Email Address
11824	
License #	
Tri - City Tas	910-486-8555
Insulation Contractor's Company Name & Address	Telephone
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*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

7-6-20

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: 7-6-20