



Application # _____

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Jeffrey Gonzalez Date: 12-6-22
Site Address: 97 Carterbury Sanford, NC Phone: 646-415-4477
Subdivision: Carolina Lakes Lot: _____
Description of Proposed Work: New Construction Total Job Cost: 250k

General Contractor Information

Lyon Builders Inc 9193530370
Building Contractor's Company Name Telephone
2139 Barbecue Church Rd. Lyonp70@gmail.com
Address Sanford NC 27332 Email Address
56754 HEATED SQ FT 1792 GARAGE SQ FT 494
License #

Electrical Contractor Information

Description of Work Electrical Service Size: 200 Amps T-Pole: Yes No
Wester 2 Pole 919-498-4948
Electrical Contractor's Company Name Telephone
614 Leslie Rd. Sanford NC
Address Email Address
12002-U
License #

Mechanical/HVAC Contractor Information

Description of Work Certified Heaty & A.c (HVAC)
Certified Heaty & A.c 910-502-9130
Mechanical Contractor's Company Name Telephone
207 David Parrell St. Parkton NC
Address Email Address
2002
License #

Plumbing Contractor Information

Description of Work McDonald Plumbing # Baths 2 1/2
New Plumbing 919-770-0773
Plumbing Contractor's Company Name Telephone
5321 Sumner's Statern Rd.
Address Sanford, NC Email Address
11824
License #

Insulation Contractor Information

Tri-City Insulation 910-486-8855
Insulation Contractor's Company Name & Address Telephone

***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

12-6-22

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: 12-6-22