



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.hamett.org/permits

*** 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: Angela Pope Lyon Date 09/01/2024

Site Address: 1710 Ponderosa Road Cameron, NC 28326 Phone 919-353-0276

Subdivision: N/A Lot #2 _____

Description of Proposed Work: Building Residential Home Total Job Cost \$500,000

General Contractor Information

Angela Pope Lyon Telephone 919-353-0276

Building Contractor's Company Name 1718 Ponderosa Road Cameron, NC 28326 Telephone angielyon1974@gmail.com

Address _____ Email Address _____

License # HEATED SQ FT _____ GARAGE SQ FT _____

Electrical Contractor Information

Description of Work Wire New Construction Service Size: 200 Amps T-Pole: Yes No
William Wester Telephone 919-499-3946

Electrical Contractor's Company Name 614 Leslie Road Sanford, NC 27332 Telephone _____

Address _____ Email Address _____

12007-U

License # _____

Mechanical/HVAC Contractor Information

Description of Work Duct work & Unit for New Constructiton Telephone 910-858-0000
certified Heating & Air

Mechanical Contractor's Company Name 207 David Parnell Street Parkton, NC 28371 Telephone _____

Address _____ Email Address _____

H3C1-20012

License # _____

Plumbing Contractor Information

Description of Work Plumb New Construction # Baths 3 1/2
McDonald Plumbing Telephone 919-770-0773

Plumbing Contractor's Company Name 5321 Swann Station Road Sanford, NC 27332 Telephone _____

Address _____ Email Address _____

11824

License # _____

Insulation Contractor Information

Tri-City Insulation 3154 Camden Road Fayetteville, NC 28306 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.

Angela R. Lynn
Signature of Owner/Contractor/Officer(s) of Corporation

9-1-2024
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: Angela R. Lynn, Owner

Date: 9-1-2024