



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

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.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Halcyon Horres, LLC Site Address: 132 Prince Place Drive Fuguary various	Date VIV22
Site Address: 132 Prince Place Drive Fugury William	27526 Phone 919 -337 -6245
Subdivision: Prince Place	Lot 66
Description of Proposed Work: New Construction	Total Job Cost #390 23 1
General Contractor Information	• In the second second
	919-337-5245
Hakyon Horres, LLC Building Contractor's Company Name	Telephone
PO BOX 33578 Raleigh NC 27636	arobertson@halwonhomesnc.com
Address	Email Address
71295 HEATED SQ FT_2554 GARAGE	SQ FT 485
License #	
Description of Work Electrical Contractor Information Service Size	ation
Tool Time Electric	
Electrical Contractor's Company Name	919-215-9245 Telephone
PO BOX 1347 Aprix NC 27502	brandowateottime electric com
Address	Email Address
31034-I	
License #	
Mechanical/HVAC Contractor Info	<u>ormation</u>
Description of Work HUAC	
Maynor Heating dAir Conditioning	919-897-6404
Mechanical Contractor's Company Name	Talankana
1000 Goodworth Drive Apex NC 27539	<u>Geral Maynorhux</u> . Com Email Address
Address	Email Address
12309	
License #	.Al
Plumbing Contractor Informa	2
Description of Work Plubing	# Baths_2.5 919.418-4565
Sweetwater Plumburg, LLC	
Plumbing Contractor's Company Name	Telephone
4316 Triland Way Cary NC 27518 Address	For a sweetwaterplumbing Ill. Lon
23793 P1 unlimited	Email Address
License #	
Insulation Contractor Informa	ation
Stepheno Building Productor, LLC	919-630-8365
Insulation Contractor's Company Name & Address 1200 Corporation Print Telephone Suite 121 Ralagi NC 27610	
*NOTE: General Contractor / owner must fill out and sign th	e second page of this application
Towner made in out and sign th	o occord page of this application.

strong roots · new growth



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

1/11/22

	Affidavit for Worker's Compensation N.C.G.S. 87-14	
Th	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.		
cc	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.		
Si	gn w/Title: Alisten P, Pulentso - Operation Many Date: 1/11/22	

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1612244

Filed on: 01/12/2022 Initially filed by: arobertson

Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com

Project Property

132 Prince Place Drive Fuquay-Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

01/19/2022

Date of First Furnishing

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors: Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this

project.

Owner Information

Halcyon Homes, LLC PO Box 33578 Raleigh, NC 27636 United States

Email: arobertson@halcyonhomesnc.com

Phone: 919-337-5245

View Comments (0)

Technical Support Hotline: (888) 690-7384