



Application#____

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

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 Homes, LLC	Date 3/3/22_
Site Address: 87 Prince Place Drive	Phone 919-337-5245
Subdivision: Prince Place	Lot 4
Description of Proposed Work: New Construction	
General Contractor Informat	
Hakyon Hones, LLC	919.337-5245
Building Contractor's Company Name	Telephone
PO Box 33578 Raleigh NC 27636	arobertson Thakyonhomes nc. 60m
Address 2,667	Email Address
	SQ FT COS
License # Electrical Contractor Informa	ntion
Description of Work Flectsical Service Siz	ze: <u>206</u> Amps T-Pole: <u>V</u> esNo
Tool Time Electric	919-215-9245
Electrical Contractor's Company Name	Telephone
PO BOX 1347 Apex NG 27502	brandon@tooltimeelætric.Lom
Address	Email Address
Mechanical/HVAC Contractor Info	ormation
Description of Work HVAC #NStall	
Maynor Heating : Air Low ditioning	919-897-6404
Mechanical Contractor's Company Name	Telephone
1000 GOODWOTH Drive Apek NC 27539	agral la maynorservices. 6M
Address	Email Address
35159	
License #	
Plumbing Contractor Informa	
Description of Work Plumbing	# Baths
Sweetwater Plumbing, LLC	919-418-4565
Plumbing Contractor's Company Name	Telephone
4316 Triland way Cary NC 27518	toma sweetwater plumbing 11K. LA
Address 23793 71 unlimited	Email Address
License #	
Insulation Contractor Informa	ation
Stephens Building Product +, LLE 1200 Corpordion	919-630-8365
Insulation Contractor's Company Name & Address	Telephone
Suite 12/ Raisish NC 27610	
*NOTE: Consent Conference Lawrence City Conference Conf	and the second s

*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.

2/7/22

Mester Relation

Signature of Owner/Contractor/Officer(s) of Corporation Date	
Affidavit for Warker's Companyation N.C.C.S. 97.14	
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: Muleston Operations Manag Date: 3/3/22	