



* 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 Hones, LLC	Date 3/3/21
- 010	Phone 919-337-5245
Subdivision: Prince Place	
Description of Proposed Work: New Landing	■ Department of the control of the
General Contractor Information	
Hakyon Hores, LLC	919-337-5245
Building Contractor's Company Name	Telephone
PO BOX 33578 Raleigh HL 27636	ardortson@hallyonhoresnace
Address	Email Address
71295 HEATED SQ FT 2488 GARAGE SO	OFT GOL
License # Electrical Contractor Information	'n
	Amps T-Pole: Yes No
Tool Time Electric	919-215-9245
Electrical Contractor's Company Name	Telephone
PO BOX 1347 Aprex NC 27502	brancon@tooHimeelectric.com
Address	Email Address
_3\034 - I License #	
Mechanical/HVAC Contractor Inform	<u>nation</u>
Description of Work HUAC INStall	
Maynor Heating & Air Constitioning Mechanical Contractor's Company Name	919-897-6404
Mechanical Contractor's Company Name	Telephone
1000 Goodworth Drive Apex NC 27589	gerall@maynorservices.com Email Address
Address	Email Address
35 \\ \frac{59}{100} \\ \text{License #}	
Plumbing Contractor Information	
Description of Work Rumbing	# Baths
	919-418-4565
Plumbing Contractor's Company Name	Telephone
4316 Triland way Cary NC 27518 -	tom@sweetwater plunbing 112. Com Email Address
	Email Address
13793 P1 UNIMITED	
Insulation Contractor Information	on
	The state of the s
Steplant Building products, LLC 1200 Lorporation Insulation Contractor's Company Name & Address Plusy.	Telephone
Suite 121 Raleish NC 27610	
*NOTE: General Contractor / owner must fill out and sign the second nage 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

3/3/22 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: Mulatro Operations Mong. Date: 3/3/22