

* 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 <u>8/2/22</u>	
Site Address: 171 Blue Monarch Lane	Phone 919-337-5245	
2 21	Lot 29	
	_ Total Job Cost _ 489 1770 =	
General Contractor Information		
	919-337-5245	
Halcyon Horres LLC Building Contractor's Company Name	Telephone	
PoBox 33578 Raleigh NC 27636 Address	<u>arobertson@halcyonhoresnc.c</u> Email Address	
71295 HEATED SQ FT 288 GARAGE SC	OFT 503	
License #		
Description of Work Electrical Electrical Contractor Informatio Service Size:	<u>n</u> <u>2oo</u> Amps T-Pole: <u></u> ✓YesNo	
Tool Time Electric	919-215-9245	
Electrical Contractor's Company Name	Telephone	
PO Box 1347 Apex NC 27502 Address	Email Address	
31034-7		
License #		
Mechanical/HVAC Contractor Information		
Description of Work HVAC	0:0 00:0	
A: Maynor Heating JAIT Conditioning Mechanical Contractor's Company Name	919 - 897 - 6404 Telephone	
4108 Atlanta Avenue Raloigh NL 27604		
Address	<u>geral Do may nor services</u> . 60M Email Address	
35/59		
License #		
Plumbing Contractor Informatio		
Description of Work Plunbing	_# Baths	
Sweetwater Phubing, LLC Plumbing Contractor's Company Name	<u>919-418-4565</u> Telephone	
4316 Triland Way Cary NL 27518	•	
Address	ton@ sweethylerplumbing 11.64 Email Address	
23793 P1 unionited		
License #		
Stephene Building Products, LLC		
Insulation Contractor's Combany Name & Address	919 - 630 - 836 S Telephone	
1200 Lorpordion PKWy Suite 121 Paleigh NC	27610	
*NOTE: General Contractor / owner must fill out and sign the second page of this application.		

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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

8/2/22 Date

The	Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
1	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.		
Depa to is:	e working on the project for which this permit is sought it is understood that the Central Permitting artment issuing the permit may require certificates of coverage of worker's compensation insurance prior suance of the permit and at any time during the permitted work from any person, firm or corporation ving out the work.		
Sign	w/Title: Muster Rolerton Operations Mana Date: 8/2/22		