



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

* 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: Halyon Homes, LLC Date 5/15/23
Site Address: 222 Blue Monarch Lane Phone 919-337-5245
Subdivision: Prince Place Lot 32
Description of Proposed Work: New Construction Total Job Cost \$485,000.00

General Contractor Information

Halyon Homes, LLC 919-337-5245
Building Contractor's Company Name Telephone
PO Box 33578 Raleigh NC 27636 arobertson@halyonhomesnc.com
Address Email Address
71295 **HEATED SQ FT 2,989 GARAGE SQ FT 669**
License #

Electrical Contractor Information

Description of Work Electrical Service Size: 200 Amps T-Pole: LY Yes ___ No
Two Time Electric 919-215-9245
Electrical Contractor's Company Name Telephone
PO Box 1347 Apex NC 27502 brandon@twotimeelectric.com
Address Email Address
31034-I
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC install
Maynor Heating & Air Conditioning 919-897-6404
Mechanical Contractor's Company Name Telephone
4108 Atlantic Avenue Raleigh NC 27604 gerald@maynor-hvac.com
Address Email Address
35159
License #

Plumbing Contractor Information

Description of Work Plumbing # Baths 3
Sweetwater Plumbing, LLC 919-418-4565
Plumbing Contractor's Company Name Telephone
4316 Triloud Way Cary NC 27518 jon@sweetwater-plumbingllc.com
Address Email Address
23793 P1 Unlimited
License #

Insulation Contractor Information

Stephens Building Products, LLC 919-630-8365
Insulation Contractor's Company Name & Address Telephone
1200 Corporation Pkwy Suite 121
Raleigh NC 27610

***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.



Signature of Owner/Contractor/Officer(s) of Corporation

5/15/23

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: Austin Robertson - Operations Manager Date: 5/15/23