

* 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

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: Giovanni Richie & Bonita Richie	Date April 08, 2025
Site Address: 1446 Neighbors Road, Dunn, NC 28334	Phone 910-273-6424
Subdivision: N/A	Lot N/A
Description of Proposed Work: Finishing off bonus room.	Total Job Cost \$70,000
General Contractor Informatio	
Giovanni Richie & Bonita Richie	910-273-6424
Building Contractor's Company Name	Telephone
1446 Neighbors Road, Dunn, NC 28334	giovanni.richie@icloud.com
Address	Email Address
Owners HEATED SQ FT 1440 GARAGE S	Q FT N/A
License #	
Electrical Contractor Information	
Description of WorkChange main panel and install subpanel in bonus roomService Size:	
Ramos Electric Inc.	910-689-7739
Electrical Contractor's Company Name	Telephone
177 Washington Lane, Cameron, NC 28326	ulises@ramoselectricnc.com
Address	Email Address
U.35014	
License # Mechanical/HVAC Contractor Inform	mation
Description of Work Install 3 ton HVAC unit for bonus room.	Hation
Coria's Heating and Air LLC	910-973-0514
Mechanical Contractor's Company Name	Telephone
504 Warren Road, Erwin, NC 28339	jimmycoria0528@gmail.com
Address	Email Address
35854 H3-1	
License #	
Plumbing Contractor Information	
Description of Work Install shower, sink and toilet for Bonus Room	# Baths_1
Richard D. White	919-467-6869
Plumbing Contractor's Company Name	Telephone
120 Baptist Church Road, Bunn, NC 27508	rdwhite1935@yahoo.com
Address	Email Address
16941	
License #	
Insulation Contractor Information	
MD Insulation LLC 15026 Buffalo Road, Clayton, NC 27527 Insulation Contractor's Company Name & Address	919-437-1574
	Telephone

*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.

Giovanni Richis Signature of Owner/Contractor/Officer(s) of Corporation April 08, 2025 Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
General Contractor X 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.	
X 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: <u>Giovanni Richia</u> Owner Date: April 08, 2025	