



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): ☒ Residential ☐ Non-Residential

SITE ADDRESS: 454 John Stark Dr. Fuquay Varina NC 27526 PIN: _____

LANDOWNER: Lynn Cooper Mailing Address: 454 John Stark Dr.

City: Fuquay Varina State: NC Zip: 27526 Phone: 843-461-0246 Email: lyn.cooper1@gmail.com

JOB COST (required): \$9118.00

DESCRIPTION OF WORK: Automated in-ground residential irrigation system installation

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other _____
Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other Split tap/meter

CONTRACTOR INFORMATION

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

Conserva Irrigation
Contractor's Company Name
5621 Departure Dr. #113 Raleigh NC 27616
Address
34946
License #

919-535-9804
Phone
thetriangle@conservairrigation.com
Email

not valid
doesn't match
919-535-9804

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Contractor's Company Name
Address
License #

Phone
Email

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

Joshua Williams

Signature of Owner/Contractor

8/31/2025

Date