



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: Lyn 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
305 Meadows Dr. Forest VA 24551
Address

919-585-984
Phone
thetriangle@conservairrigatio.com
Email

Plumbing License 34946 / NC License 1375
License #

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

Contractor's Company Name

Phone

Address

Email

License #

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.

Anthony Jay Gray
Signature of Owner/Contractor

9/4/2025
Date