

**APPLICATION FOR ADMINISTRATIVE APPEAL**

Springfield Township Board of Zoning Appeals  
2459 Canfield Road, Akron, Ohio 44312 • 330-794-0134

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Address of Property Owner: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

**LOCATION /DESCRIPTION:**

Application is for property located at: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Parcel #: \_\_\_\_\_

**NATURE OF APPEAL** – Generally state the nature of the appeal: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Related Zoning Resolution Section: \_\_\_\_\_

Decision Being Appealed: \_\_\_\_\_

**Please include ten (10) sets of all documentation related to this appeal.**

**The undersigned does hereby certify that the information contained in this application and its attachments is true and correct.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

For Office Use Only:

Filing Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

Receipt#: \_\_\_\_\_ Cash/Check #: \_\_\_\_\_