

**SPRINGFIELD TOWNSHIP APPLICATION FOR CERTIFICATE OF CONFORMANCE**

Springfield Township Offices  
2459 Canfield Road, Akron, Ohio 44312 • 330-794-0134

Business Owner's Name: \_\_\_\_\_

Business Owner's Mailing Address (no P.O. Boxes): \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Certificate of Conformance requested for the address at: \_\_\_\_\_

Business Name: \_\_\_\_\_ Property Owner's Name: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

Mailing Address of Property Owner (No PO Box): \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Current Zoning District: \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Certificate of Occupancy # : \_\_\_\_\_ (May be obtained from the property owner or Summit County Department of Building Standards (SCDBS). If no certificate exists or is not valid one must be obtained.)

Application Type (Check all that apply)

- New use in a new building       New use in an existing building       Other  
 Change of use in an existing building       Change of occupant in an existing building (same use)

The building or unit is to be used for the following purpose(s) – check all that apply

- Retail       Wholesale       Recreational       General Office       Industrial  
 Restaurant       Warehouse       Auto Repair       Personal Service       Other

Description of business: \_\_\_\_\_  
\_\_\_\_\_

**Site Data (a site plan showing the lot, dimensions & location of any structures, setbacks, parking and landscaping is required)**

Estimated completion date of any construction: \_\_\_\_\_

Square footage of building/unit: \_\_\_\_\_ Square Footage of area to be open for public use: \_\_\_\_\_

Parking spaces provided: \_\_\_\_\_ No. of full time employees: \_\_\_\_\_ No. of part time employees: \_\_\_\_\_

New signs needed? \_\_\_\_\_ Changes to existing signs? [1] \_\_\_\_\_ Changes to landscaping? \_\_\_\_\_ Parking changes? \_\_\_\_\_

On site processing/assembly? \_\_\_\_\_ Chemicals in 50 gal + quantities? \_\_\_\_\_ Other on site changes? \_\_\_\_\_

If yes to the above please explain \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\* You may need to apply to the Board of Zoning Appeals if your business will include any outdoor storage/sale of goods. \*\*\*\*\*

**I hereby certify that all the information provided on this application is true and accurate.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

