

Howland Township Business Use Certification

Certificate Number:	
Receipt Number:	
BZA Case Number:	

(Zoning Compliance Certification)

Dear Business Owner,

Welcome to Howland Township. I am confident that you will find our community a great place to live, work, and conduct business. A list of additional information about our services and activities can be found on our township website at www.HowlandTownship.org.

As a new business moving into the Township, there are a few things you should know. Before occupying any business space within Howland Township, a new business is required to apply to Howland Township Zoning for a new business use certification. Additionally, the Howland Fire Department must be contacted at (330) 856-5022 t or email fire.inspection@howlandtownship.org to schedule an initial fire inspection.

If you have any questions, please contact the zoning office at (330) 856-5223 or by email at zoning@howlandtownship.org Please upload this form with the formal application that is located at Howland Townships online application portal.

https://howland.portal.iworq.net/portalhome/howland

Occupant/Applicant Information

Applicant Name:

Business Name:		
Business Address:		Suite #:
Business Owner(s):		
Telephone:	Email:	
Building Owner:	Owner Telephone:	
Building Owner Address:		
<u>Description of Proposed Business Use</u>		
Name of Business:		
Square footage of space dedicated to use:		

Zoning Department, New Business Use Certification

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List of goods to be sold:			
List of services to be offered:			
List of services to be offered:			
The maximum number of employees on premises	at any one	time:	
Describe any aspect of the business use that wou			storage display or sale of anything
connected with the business use. Please note that Industrial Zoning Districts. Further, outdoor stora but the product must be completely shielded from	nt outdoor s nge is perm	storage is p itted in the	ermitted in the C – Commercial and I-
Describe any unusual aspect or hazards of the bu	ısiness use);	
	1		
Will there be any changes to the landscaping?	☐ Yes*	□ No	*If yes, a plan review is required
Will there be any changes to the parking area?	☐ Yes*	☐ No	*If yes, a plan review is required
Will there be any changes to the building exterior?	☐ Yes*	□ No	*If yes, a plan review is required
exterior?			
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Will there be any other site changes?	☐ Yes*	□ No	*If yes, please describe below:
Will there be any changes to the signage?	☐ Yes*	☐ No	*If yes, a sign permit is required,
			even if replacing sign face.
			lots must meet both front setbacks.
Shopping Center or Multiple Occupancy Building	g: ☐ Yes	*□ No	
*Center/Plaza/Building Name:			
Days and hours of operation:			
_ ay a and model of operation	through		; to and
			<u> </u>
	through_		;to



Howland Township Fire Department

169 Niles Cortland Road N.E. Warren, Ohio 44484

Phone 330-856-5022 FAX 330-609-9977

Business Contact Form

Business	Name:						Date:		
Address:							Suite:		
City:					State:			Zip:	
Phone:					Fax:				
Primary (Contact:						Phone:		
Email:									
Seconda	ry Contac	t:					Phone:		
Email:									
Addition	al Contac	ts:							
Property	Informa	tion							
Business	Owner A	ddress:					Phone:		
Email:					Business I	Insurance:			
Building	Owner:				Address:				
Phone:			Email:						
Alarm In	formatio	n							
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