

**AKRON BOARD OF ZONING APPEALS**  
**APPEAL OF ORDER TO COMPLY**

To: The Board of Zoning Appeals, Akron, Ohio      Date: \_\_\_\_\_

The undersigned (circle one) **owner / holder of option / lessee /** \_\_\_\_\_  
of the property herein involved, does hereby appeal the Superintendent of Building Inspection's  
ORDER TO COMPLY (and NOTICE OF ADMINISTRATIVE PENALTY) dated \_\_\_\_\_  
to the Board of Zoning Appeals.

**SUPPORTING INFORMATION**

IF ALL THE APPLICABLE PROVISIONS BELOW ARE NOT SUPPLIED WITH THIS APPEAL,  
NORMAL PROCESSING WILL NOT OCCUR UNTIL ALL ITEMS ARE SUBMITTED.

1. Property Location (Address and Parcel Number(s)): \_\_\_\_\_

\_\_\_\_\_

2. Violation(s) Cited: \_\_\_\_\_

\_\_\_\_\_

3. My reasons for this appeal are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Attach a copy of the ORDER TO COMPLY (and NOTICE OF ADMINISTRATIVE PENALTY) being  
appealed.

\_\_\_\_\_  
PRINT / TYPE name of **OWNER(S)**

SIGNATURE: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
PRINT / TYPE name of **\_\_Holder of option \_\_Lessee**

SIGNATURE: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

**ALSO NOTIFY:**

**ALSO NOTIFY:**

\_\_\_\_\_  
PRINT or TYPE name

\_\_\_\_\_  
PRINT or TYPE name

\_\_\_\_\_  
Relationship to Petitioner (agent, attorney, principal, etc.)

\_\_\_\_\_  
Relationship to Petitioner (agent, attorney, principal, etc.)

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**A NON-REFUNDABLE FILING FEE shall accompany this appeal upon submittal to  
Office of Integrated Development, Zoning Division  
Municipal Building Room 405, 166 S. High Street, Akron, OH 44308-1628**

**Please make CHECKS PAYABLE to City of Akron.**

DO NOT WRITE BELOW THIS LINE

Reason(s) for requiring an Appeal is/are: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Zoning Manager

This is to certify that a fee of \$ \_\_\_\_\_ has been received for investigation incident to this appeal. (\$250.00)

Receipt # \_\_\_\_\_

Appeal # \_\_\_\_\_ -2024-Z

\_\_\_\_\_  
Signature of City Employee

Councilperson \_\_\_\_\_ Ward \_\_\_\_\_

\_\_\_\_\_  
Title

**COUNCIL TIME STAMP**

**ZONING TIME STAMP**

# 2024

## AKRON BOARD OF ZONING APPEALS

<u>MEETING</u>	<u>FILE DATE</u>
JANUARY 31, 2024	DECEMBER 20, 2023
FEBRUARY 28, 2024	JANUARY 17, 2024
MARCH 27, 2024	FEBRUARY 14, 2024
APRIL 24, 2024	MARCH 13, 2024
MAY 29, 2024	APRIL 17, 2024
JUNE 26, 2024	MAY 15, 2024
JULY 24, 2024	JUNE 12, 2024
AUGUST 28, 2024	JULY 17, 2024
OCTOBER 02, 2024	AUGUST 21, 2024
OCTOBER 30, 2024	SEPTEMBER 18, 2024
NOVEMBER 20, 2024	OCTOBER 09, 2024
DECEMBER 18, 2024	NOVEMBER 06, 2024

In order to become ELIGIBLE for placement on the above meeting dates, the accompanying petition/appeal must meet all of the requirements as listed in the petition/appeal. Submission on or before the file date does not guarantee placement on the corresponding meeting's agenda but enables you to become eligible for the meeting.