



# SPRINGBORO

320 W. Central Ave.  
Springboro, Ohio 45066  
(937) 748-9791 PH  
(937) 748-6860 FX  
build@cityofspringboro.com

FEE: 45.00

## APPLICATION FOR CERTIFICATE OF ZONING COMPLIANCE

BUSINESS NAME (DBA): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PROPOSED ACTIVITY OR USE:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: All new work, except minor maintenance and repair, requires a building permit(s).  
Please contact the Springboro Building Department for further information.**

<u>PLEASE PRINT</u>	Name	Address	Phone Number & Email <small>* BOTH REQUIRED TO PROCESS APPLICATION*</small>
Property Owner			
Business Owner			

I hereby certify that all information on this application is true and correct to the best of my knowledge.  
I further certify that I have contacted the Springboro Tax Department regarding the business' tax obligation.

Applicant's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

ZONING APPROVAL: \_\_\_\_\_

DATE: \_\_\_\_\_