



# City of Munroe Falls

330-688-7491 phone 330-688-3720 fax

**Division of Zoning**  
43 Munroe Falls Avenue  
Munroe Falls, Ohio 44262

## BUSINESS REGISTRATION APPLICATION

A Business Registration Certificate is required prior to occupation of commercial structures under Munroe Falls Codified Ordinances Chapter §722.01. A Certificate must be obtained for any newly constructed commercial property, businesses moving into existing commercial developments or businesses moving into commercial property rentals. All businesses moving into existing commercial developments must comply with all zoning district regulations prior to receiving their business registration certificate. A Certificate must also be obtained whenever a business changes ownership or a full/partial change from one business use to another occurs.

**Note:** A change in use may also require a review by the Planning Commission and/or Board of Zoning Appeals.

Upon proper submittal of all required information, it is the Applicant's responsibility to contact the **Stow Building Department (330-689-2729)** to obtain a Certificate of Occupancy or Change of Occupancy Permit, schedule inspections, and to verify any other requirements.

### Applicant/Owner Information (print clearly or type)

Business Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
WEBSITE: \_\_\_\_\_  
Email: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Business Website: \_\_\_\_\_

*This will be:*

- New Business
- New Construction
- New Tenant or Renter
- Remodel Existing Property
  - Interior
  - Exterior
- New Business owner without altering name or property
- Name change only
- Alcohol Service or Sales

### Business Information

Describe type of business (in detail): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Hours of Operation: \_\_\_\_\_  
Number of Employees: \_\_\_\_\_  
Number of Parking Spaces Required: \_\_\_\_\_

Business Signage:

- Alter or replace existing
  - Changing size or dimension to: \_\_\_\_\_
- Adding New
- No sign

*Note:* All signage requires city Zoning Permit and approval prior to installation.

BUSINESS OWNER: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, St, Zip: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

### Procedure in order as follows:

**Step #1.** Complete Business Registration Application & submit to City for review.

**Step #2.** City will meet with new business to determine applicable requirements and permits and inform Stow Building Department.

**Step #3.** Applicant to submit to Stow Building Dept Permit Application and floor plan for Occupancy Certificate (fees apply).

**Step #4.** Upon compliance of the Zoning & Building Codes, Business Registration Certificate issued by city.

## Applicant Certification

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS REGISTRATION IS TRUE AND ACCURATE AND CONSENTS TO AGENTS OF THE CITIES OF MUNROE FALLS AND STOW ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED, AND IF THIS REGISTRATION IS APPROVED, TO VERIFY CONFORMANCE TO REQUIREMENTS AND CONDITIONS OS SUCH APPROVAL. IN ADDITION;

I/WE HEREBY AGREE TO CONFORM TO THE CITY OF MUNROE FALLS ZONING CODE. I/WE HAVE NOT REQUESTED PERMISSION TO BUILD ANYTHING THAT IS IN CONFLICT WITH THE **HOMEOWNER'S ASSOCIATION** or **DEED RESTRICTION** FOR THIS PROPERTY.

Business Owner (Applicant) Signature \_\_\_\_\_ DATE: \_\_\_\_\_

Property Owner Signature \_\_\_\_\_ DATE: \_\_\_\_\_  
(Required for renters/tenants)

### FOR CITY USE ONLY

**Zoning District:**

- Town Center
- Commercial
- Industrial
- Property abuts residential district
- Conditionally permitted use
- Other \_\_\_\_\_

**Administrative Review Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Action:**

- Authorized to apply for Certificate of Occupancy at Stow Building Dept.
- Applicant to Stow Building Department (Floor Plan required)
- Sign Permit Application
- Zoning Permit Application (circle):    **Planning Commission**                      **Board of Zoning Appeals**

**City of Munroe Falls Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- New Business - with signage \_\_\_\_\_ without signage \_\_\_\_
- Sign Permit Application Required to Zoning Department (separate application)
- Conditionally permitted business use: \_\_\_\_\_
- Other: \_\_\_\_\_

**Your Zoning District is:**

- Town Center
- Industrial
- Commercial
- Other: \_\_\_\_\_

**APPLICANT SHALL RETURN ALL OF THE FOLLOWING MARKED ITEMS:**

- Planning Commission Application (completed) along with required fees by: \_\_\_\_\_  
For meeting on: \_\_\_\_\_
- Board of Zoning Appeals Application (completed) along with required fees by: \_\_\_\_\_
  - Variance required for: \_\_\_\_\_
  - for meeting on: \_\_\_\_\_
- Letter of permission from Property Owner
- SITE PLAN (for new construction) INCLUDING:
  - Completed Zoning Permit Application
  - Property dimensions
  - Building dimensions
  - Setbacks
  - Water lines, storm sewer, sanitary sewer and other all other utilities
  - Number of parking spaces
  - Landscaping
  - Screening
  - Dumpsters
  - All accessory buildings or structures on property
  - \_\_\_\_\_
- List of all deed restrictions, easements, covenants, or plat restrictions
- Topographical map
- Drainage
- Proposed storm water drainage and sediment control (*must submit application to Summit Soil and Water Conservation District for approval*) 330-929-2871
- Other: \_\_\_\_\_
- Occupancy or Change of Occupancy Permit and inspection from **City of Stow Building Dept 330-689-2729** (copy to City of MFO)

**NOTES:**

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