

APPLICATION FOR ZONING APPEAL

Must be completed and submitted at least 15 days prior to the date of the hearing.

Name: Tammy Huffman (SANDERS).
The transfer of the transfer o
Address: 330 Hohman Auf
Akron OL 443/9
Phone No. (A.M.) 330-608-5198 (P.M.) SAME
Address of Property where Variance is requested:
330 Hohman Aug
Name, address and telephone number of property owner (include zip code):
Rachey Hartwell TAMMY SANDERS.
320 Hohman Au Akron Oh 44319
Zoning District:
Variance Requested:
2 feet
Proposed construction will be:
Add Garage
Your Reasoning for Requesting a Variance
(applicant may attach a statement on separate paper):

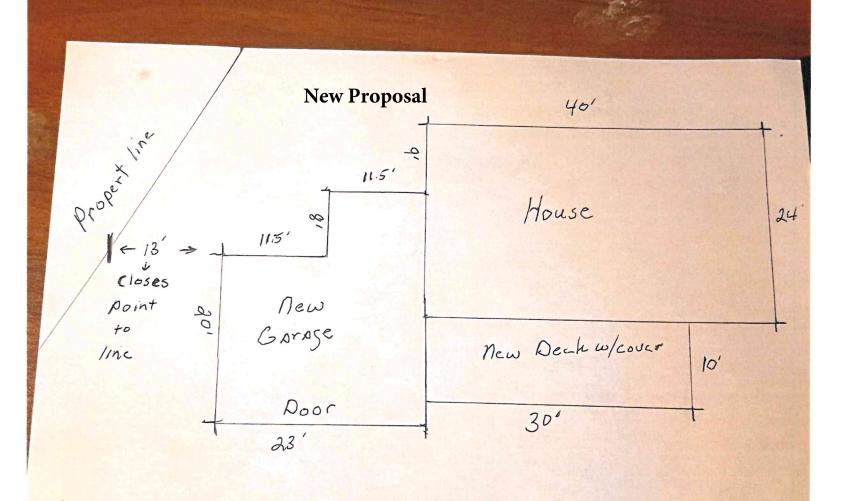
Adjacent Owners: Names	Mailing Address and Zip Code:
Signature of Applicant:*	Date: 6-3-2025
Date of Hearing:	

*By signing this application, the applicant acknowledges they have read the attached "Procedure for Zoning Variance," "Guidelines for Decisions on Variances," "Conduction of Zoning Appeals Meeting," and "Coventry Township Board of Zoning Appeals" before the hearing.

Please attach the required site plan and any additional drawings to this application.

FOR OFFICE USE ONLY

TYPE	FEE AMOUNT	DATE	PAYMENT TYPE	RECEIPT NUMBER
VARIANCE APPLICATION FEE	\$250.00	6-6-25	CASH	951686
CONDITIONAL USE APPLICATION FEE	\$300.00			



330 Hahman

Scale 18 = 1'

Old Proposal



:20

@ " GARAGE 24'x28' 10:6

Deele 10'x 30'

ownernme1	pstladdress	pstlcitypstlstatepstlzip5
DIVERSIFIED PRODUCTION LLC,	101 MCQUISTON DRIVE ,	JACKSON CENTER , PA 16133
SMITH GREGORY L ,	316 HOTTLE ST ,	AKRON , OH 44319
COX KINDRA E ,	320 HOTTLE ST ,	AKRON , OH 44319
HARTWELL RODNEY,	326 HOHMAN AVE ,	AKRON , OH 44319
ROBERTS JEFFERY ,	359 HOHMAN AVE ,	AKRON , OH 44319
OCONNOR MARYANNE,	1888 ELDRIDGE AVE ,	AKRON , OH 44301
BUCKLEY HARLEY ,	337 HOHMAN AVENUE ,	AKRON , OH 44319
CLEVELAND MUSEUM OF NATURAL HISTORY,	UNIVERSITY CIRCLE 1 WADE OVAL DR ,	CLEVELAND , OH 44106