



# BATH TOWNSHIP ZONING

Summit County, Ohio

3864 West Bath Road - P.O. Box 1188 - Bath, Ohio - 44210-1188  
Phone: 330.666.4007 - Fax: 330.666.0305  
www.bathtownship.org

## APPEARANCE REVIEW COMMISSION

For office use only:	ARC File No.:	BZA File No.:
Associated permits:		

### Applicant Data

Name: Michael A Ruth

Company Name: Fastsigns Akron

Address: 1783 Brittain Rd Akron, OH 44303

Telephone No.: 330 630 3500 Email: 129@fastsigns.com

### Property Data

Zoning District: (circle one) R-1 R-2 R-3 R-4 B-1 B-2 **B-3** B-4 B-5

Corner Lot:  Yes  No Note: Corner lots are required to meet the front setback on both streets.

Property Address: 87 Springside Dr

Allotment Name: \_\_\_\_\_ Parcel No.: 0500816

Owner(s): Violet Djuric

Owner Address: vdjuricca@gmail.com

Telephone No.: 289 218 9161

### Type of Review (check all that apply)

- Site Plan
- Building/Elevation
- Sign
- Other (explain): \_\_\_\_\_

### Required Site Plan Data and Architectural Drawings

The following items must be submitted with the application in order to be reviewed. A digital copy of site plan and plans will be required upon submission. (the application will be reviewed and placed on the agenda for review by the ARC once the application is deemed complete)

- 2 copies of site plan – must show existing structures, proposed structures, all setbacks and lot dimensions, driveway access location, all easements, septic system and well location (if applicable), and any unusual topography (include streams, lakes, ponds, ravines, steep slopes, etc.)
- 2 copies of elevations, signs, landscaping, lighting, parking, etc.
- Digital copy of all required documents (i.e. .pdf file)

Fee – Due at time of application (make check payable to Bath Township Trustees)

- For Site Plan - \$100.00

Applicant Signature:  Date: 5/19/26



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## SIGN (PERMANENT) APPLICATION

For office use only:	Permit No.:	ARC File No.:	BZA File No.:
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### Applicant Data

Name: Michael A. Ruth

Company Name: Fastsigns Akron

Address: 1783 Brittain Rd Akron, OH 44310

Telephone No.: 330 630 3500 Email: 129@fastsigns.com

### Property Data

Zoning District: (circle one) R-1 R-2 R-3 R-4 B-1 B-2 **B-3** B-4 B-5

Site Address: 87 Springside Dr

Owner(s): Violet Djuric

Owner Address: vdjuricca@gmail.com

Telephone No.: 289 218 9161

Is this a corner lot?  Yes  No

Shopping Center or Multiple Occupancy Building  Yes\*  No

\*Plaza/Building Name: \_\_\_\_\_

### Sign Data

All permanent sign applications will be reviewed by the Appearance Review Commission (ARC). The ARC reviews the proposed signage and recommends to the Zoning Inspector and Board of Zoning Appeals, if applicable, as to the:

1. General appearance of the sign and compatibility with the surrounding areas
2. Height & Size
3. Landscaping
4. Other contributing factors

Fill out the table below for each proposed sign with the following information:

1. Reason – new, replacement, alteration, location change, etc.
2. Type – wall, side wall, monument, or canopy
3. Overall sign dimensions – height x width x depth (in feet)
4. Sign area in square feet
5. Illumination – internal or external and candle power
6. Number of sides
7. Building face area in square feet

Sign No.	Reason	Type	Dimensions	Area	Illumination	Number of Sides	Building Face Area
1	<b>Store Identification</b>	Wall	102.8" X 24"	17.1 sq ft	<b>Yes</b>	<b>1</b>	715 sq ft
2							
3							
4							
5							

Total area of wall signs: 1

Percentage of wall area: 2.4%

**Required Site Plan Data and Sign Detail Drawings**

The following items must be submitted with the application in order to be reviewed. The application will be reviewed by the Zoning Inspector and the Appearance Review Commission. No applications will be reviewed at the time of submittal. *Incomplete applications will delay the review process.* Site inspections will be conducted at the discretion of the Zoning Inspector.

1. One (1) copy of the site plan showing the following:
  - A North arrow and scale
  - Existing structures and dimensions
  - Driveway and road access locations (existing and/or proposed)
  - Proposed sign location(s)
  - Sign area landscaping denoting type and quantity of material (if applicable)
  - All applicable setbacks
  - Roads
  - Lot dimensions
  - Indicate the location of lakes, ponds, wetlands, ravines, or other unusual topography
  - Riparian Corridor(s) must be clearly indicated on all lots containing applicable watercourses
  - All slopes greater than 18% must be indicated on a two (2) foot contour interval map with the contours extending at least 100 feet beyond the lot lines
  
2. One (1) copy of the sign drawings showing the major details listed below.
  - Overall size, drawn to scale
  - Sign area calculations, including building wall face area (if applicable)
  - Lighting (if applicable)
  - Landscaping (if applicable)
  - Construction materials
  - Mounting details including height of sign above grade
  - Detailed sign color elevations
  
3. Digital copy of all required documents (i.e. .pdf file)

**Applicant Certification**

By initialing, the applicant has read, understands, and agrees to the following:

*MR*

\_\_\_\_\_ 1. Right Of Revocation - It is understood and agreed by this applicant that any error, misstatement, misrepresentation of material fact, with or without intent, such as might and/or would case a refusal of this application, or any material alteration in the accompanying plans made subsequent to the issuance of a Zoning Certificate without approval of the Zoning Inspector or Zoning Board of Appeals, shall constitute sufficient grounds for the revocation of such certificate.

*MR*

\_\_\_\_\_ 2. The applicant agrees to allow the Zoning Inspector access to the property for on-site inspection(s).

*MR*

\_\_\_\_\_ 3. There may be deed restrictions on the property that differ from the Bath Township Zoning Regulations. Please check your deed to make sure that any proposed project meets any restrictions that may be in effect.

*MR*

\_\_\_\_\_ 4. The zoning certificate shall become void at the expiration of one (1) year after date of issuance, unless the structure or alteration thereof is started, or within two (2) years after the date of issuance, unless the structure or alteration is completed.

Applicant Signature: \_\_\_\_\_



Date: 5/19/2026

Fee (make check payable to Bath Township Trustees)

\$50.00 for each sign

For Office Use Only

Appearance Review Commission      File No.: ARC - -

Board of Zoning Appeals              File No.: BZA - -

- Approved       Approved with Conditions\*       Denied

\*If approved with conditions, attach copy of conditions to this application and Zoning Certificate.

Zoning Certificate                      File No.: ZP - -

- Approved       Denied\*\*

Zoning Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\* Reason for denial: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Business Name** Spark Physical Therapy  
**Location** 87 Springside Dr, Akron, OH 44333

**Individually Mounted Channel Letters**

**Quantity:**  
1

**Trim:**  
Black

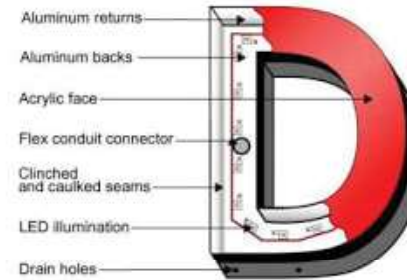
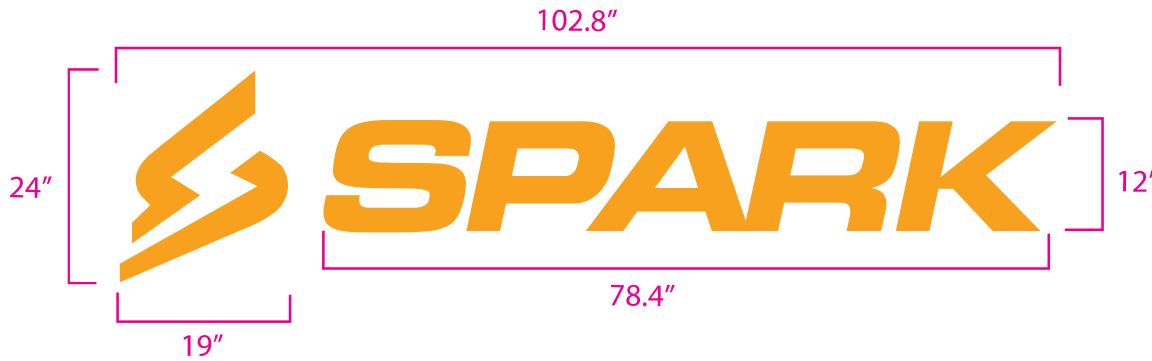
**Return Color:**  
Black

**Face:**  
Orange

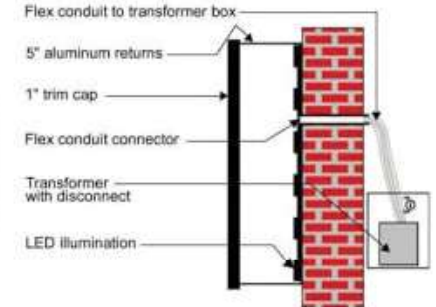
**Internal Illumination:**  
Sloan LED 6500K

**Mounting:**  
Pin/Stud

**Sq. Ft. Signage:**  
17"



**FRONT VIEW**



**SIDE VIEW FLUSH MOUNT**



**EXISTING CONDITIONS**

**FASTSIGNS**  
Make Your Statement<sup>SM</sup>

1783 Brittain Rd. Akron, Ohio 44310  
P: 330-630-3500 | 129@fastsigns.com

7219 Whipple Ave NW North Canton, Ohio 44720  
P: 330-493-7566 | 429@fastsigns.com

# Site Plan: Spark Physical Therapy

87 Springside Dr, Akron, OH 44333



X - Wall Sign Placement

**FASTSIGNS**<sup>®</sup>  
Make Your Statement<sup>™</sup>