



CITY OF WILLOWICK PLAN REVIEW BOARD
APPLICATION FOR PERMIT TO OCCUPY FOR
BUSINESS, COMMERCIAL, INDUSTRIAL, ETC.
YOU MUST FILL OUT ENTIRE APPLICATION
440-516-3000

PERMIT FEE: \$60.00

DATE: _____

Location of Occupancy: 31305 Vine Street, Willowick, OH Business Name: Burger King 634 402

(ADDRESS) Business Owner's Name & Address: Carrols, LLC, 968 James Street, Syracuse, NY 13203

CITY/STATE/ZIP: Syracuse, NY 13203

Telephone Number: 828-721-0714 Fax Number: _____ Federal ID Number: _____
Or Social Security Number

OWNER OF PROPERTY/NAME/ADDRESS/TELEPHONE NUMBER: Burger King Company LLC, 5707 Blue Lagoon Dr, Miami, FL 33126

SUBMIT NEW DETAILED FLOOR PLAN : [checked] SQ. FT. HABITABLE FLOOR AREA FOR OCCUPANCY: ±1,300 SF for patron use

Building Size: 3,180 SF Total Number Of Employees: 8-10

Intended Number of Occupants: TBD Total Number of Seating : 61

Site Plan With Number of Paved Parking Spaces: 47 Hours Of Operation : 6am - 12am

Letter of Intent: No change to existing use Previous Use: Drive through restaurant Proposed Use: No change

NAME OF PRINCIPAL OR CONTACT PERSON FOR NEW BUSINESS: Joshua Bazis

Home Address/City/Zip: Carrols, LLC, 968 James Street, Syracuse, NY 13203 Telephone Number: 828-721-0714

I hereby certify that the above questions have been answered correctly by me and that the premises will be used for the purpose stated above. Any change in the purpose of occupancy will not be made without approval from Lake County Building, Willowick Fire & Willowick Zoning Department. A final approval by The Willowick Building Dept. (440)516-3000 or a representative thereof, must be complied with before opening of business. I do hereby further agree to maintain the above premises in compliance with the ordinances of the City of Willowick.

Applicant's Signature: Joshua Bazis [Digital Signature] Date: 4/16/26

Office use only:

Zoning District: _____ Authorized Occupants: _____

TEMPORARY APPROVED BY: _____ Date: _____

Zoning Dept. Inspected by: _____ DATE: _____

Zoning Permit # _____ Zoning Permit Fee \$ _____

Fire Dept. Inspected By: _____ Date : _____

CITY OF WILLOWICK-APPLICATION FOR COMMERCIAL ESTABLISHMENT LICENSE REQUIRED AFTER APPROVAL.

Note* A separate permit is required for all new signs from the Willowick Building Department.