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

PERMIT FEE: $60.00
DATE: October 23 2026 4WT 21

Location of Occupancy: 30400 Lakeshore (ADDRESS) Business Name: Defi-Age-fitness

Business Owner's Name & Address: Roderick Sims 195 Larimar Dr.

CITY/STATE/ZIP: Willowick Ohio 44095

Telephone Number: 216-804-2448 Fax Number: _____ Federal ID Number: 1088 Or Social Security Number

OWNER OF PROPERTY/NAME/ADDRESS/TELEPHONE NUMBER: Phillip Edison & Company
11501 Northlake Drive Cincinnati Ohio 45249

SUBMIT NEW DETAILED FLOOR PLAN: _____ SQ. FT. HABITABLE FLOOR AREA FOR OCCUPANCY: 1500 sqf

Building Size: 1500 sqf Total Number Of Employees: 1

Intended Number of Occupants: 1 Total Number of Seating: 1

X Site Plan With Number of Paved Parking Spaces: _____ Hours Of Operation: _____

X Letter of Intent: ✓ Previous Use: Solove Proposed Use: Personal training

NAME OF PRINCIPAL OR CONTACT PERSON FOR NEW BUSINESS: Roderick Sims

Home Address/City/Zip: 195 Larimar Dr Willowick Telephone Number: 216-804-2448

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: _____ Date: October 28, 2026

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.

TO: City of willowick

From: Roderick Sims

My intention is to use this facility for personal Training. Helping people get in Shape And live A healthy lifestye

Oct-28, 2026

Plaza Shoregate

Defi - Age fitness

Parking

Front Door

30400 Lakeshore Blvd Willowick Unit 21

Cardio Equipment

Desk

Training Equipment

Training equipment

Bathroom

Rear door

Storage

Fire extin