



**Honeybee Permit Application**

**FOR INTAKE, STAFF USE ONLY**

Application date \_\_\_\_\_  
 Issued date \_\_\_\_\_  
 Approved by \_\_\_\_\_  
 License fees \_\_\_\_\_

**APPLICANT: Complete all sections. Please print legibly.**

**Address** \_\_\_\_\_ **Parcel #** \_\_\_\_\_

**Zoning District** \_\_\_\_\_

**Name of Apiary Owner** \_\_\_\_\_

**Address of Apiary Owner** \_\_\_\_\_

**Telephone of Apiary Owner** \_\_\_\_\_ **Email** \_\_\_\_\_

**Property Owner Name (if different)** \_\_\_\_\_

**Property Owner Address (if different)** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Email** \_\_\_\_\_

Check the box for the applicable zoning district:

- P-1 Conservancy Districts
- R-1 Residential-Agricultural Districts
- R-2 and R-3 Single-Family Residential Districts
- R-4 Single and Two-Family Residential Districts

I have read, understand and agree:

- To comply with the ordinances applicable to the keeping of honeybees.
- City staff is authorized to make inspections, during reasonable hours, to determine compliance.
- The City may revoke a permit if a permit holder incurs three (3) or more beekeeping-related violations within a 24-month period.

**Applicant's signature & date** \_\_\_\_\_