

Annual Honey Bee License Application



City of Waconia
201 Vine Street South
Waconia, MN 55387
Phone: 952-442-2184
Fax: 952-442-2135
www.waconia.org

Date:

Applicant Name:

Address:

Email:

Home #: Alternative #:

Type of Residence Structure:

- Single Family
- Two Family
- Own
- Rent

Type of Honey Bees to be kept:

Maximum # of colonies to be kept:

Will you have a water source for the colonies?

- Yes
- No

If yes, describe location of water source:

Describe waste disposal plan:

Location of hives

(A scaled drawing showing the location, size and dimensions of all hives located on the licensed premises including their distance from other structures on the lot and neighboring property lines.)

No person shall keep honeybees within the corporate limits of the City except as allowed by City Ordinance 694 or Section 710.15 of the Code. This prohibition does not apply to those portions of the City zoned for agricultural purposes.

The City may revoke a honey bee license if any requirement set forth in this Chapter is violated or if the Minnesota Department of Revenue sends the City notice requiring revocation. Nothing herein shall be interpreted as preventing the City from also prosecuting any violation of the ordinance as a criminal violation pursuant Chapter 102 of the Waconia City Code.

By signing below Applicant understands the licensed premises may be inspected by the City at any time to ensure compliance and accept the conditions and requirements set forth in City Ordinance 695. The initial license fee is calculated by the date of the license application and the per diem of \$0.41.

Applicant Signature:

If you have any questions, please contact City Hall 952-442-2184.

<u>Office Use Only</u>	
Approval Signature: <input type="text"/>	License Fee Amount: <input type="text"/>
Approval Date: <input type="text"/>	Date: <input type="text"/>
	Receipt: <input type="text"/>