

Beekeeping Permit Application



Date: _____ Number of Colonies per Acre (s): _____ Own: _____ Rent: _____

Property Owner Name: _____ Address: _____

Daytime Phone Number: _____ Evening/Alternate Phone Number: _____

Property Owner Signature: _____

Name of Permit Holder: _____ Address: _____

Daytime Phone Number: _____ Evening/Alternate Phone Number: _____

_____ Attach proposed site plan and location of hive(s) to include designation of hive(s) in backyard with dimensions from the property lines and house.

_____ Attach a list of neighboring property address(s), owner/resident names, signatures of neighbors approving.

By signing below, I attest that the above information is true and correct; that I have read and understand and agree to abide by the Town of Bennett ordinance 7-7-45 "Beekeeping" and regulations of this permit.

Signature: _____ Date: _____

This Portion is to be Completed by Town of Bennett Personnel

Permit Fee (\$25): _____ New Renewal

Paid: Credit Card Cash Check

Collected by: _____ Date: _____

Inspection Date: _____ Inspected by: _____ Permit Number: _____