

Registration No.: _____(ANIM/BEES) *(office use only)*

Application for a Permit to Keep Bees

*** Please allow 10 business days processing time.**

For applications received between 3-10 business days before the approval is required, an expedited service fee will apply. Charitable and community organisations are not exempt from this fee.

FEES FOR UP TO TWO HIVES

No fees or charges apply in 2019/2020 period.

FEES FOR MORE THAN TWO HIVES

Note: Fee increase may apply 1 July each financial year.

Application Fee: \$73 (no GST) (fee type 74)
Inspection Fee: \$146 (no GST) (fee type 72)
Total Fee Payable: \$219

Expedited Service Fee: \$146 (No GST) (fee type code)

Do you require approval within 10 business days? Yes/No

***If yes, the expedited service fee will apply.**

Applicant Details

Full name of applicant: _____

Address: _____ Post code: _____

Phone: Home: _____ Mobile: _____

Email: _____

Details of Bees/Hives

Proposed address where bees and hives to be kept (if different from applicant's address):

_____ Post code: _____

Number of hives: _____ Area of land available: _____(m²)

Please attach a site plan showing proposed location where bees and hives will be kept and the following details are included:

- Setbacks and distances to any thoroughfare, public place or boundary of land (e.g. generally 10m from any path, street, building or public place and 5m from any boundary of land);
- Located within the building envelope;
- Flight path (route taken by the bees leaving from or returning to the hive);
- A screen or other barrier to prevent bees flying low over a thoroughfare, public place or adjoining land; and
- Provision of water supply readily accessible by the bees on the land. Yes/No

Please attach a copy of your current registration as a Beekeeper with the Department of Food and Agriculture (WA) under the *Biosecurity and Agriculture Management Act 2008* Yes/No

Please attach adjoining property occupier's comments to support your application (note: separate form for each property) Yes/No

Do you intend to sell the honey or bee products? If yes, please complete an application for registration of fixed food business to comply with the *Food Act 2008* Yes/No

Applicant's Signature: _____ Date: _____

Owner's Details (if different from applicant)

Name of owner: _____

Address of owner: _____ Post code: _____

Phone: Home: _____ Mobile: _____

Email: _____

OWNER TO READ AND SIGN THIS DECLARATION

I, _____, the owner of the property, have granted the above applicant a contractual lease over the property. I consent to this application and understand my legal obligations to comply with the *City of Kwinana Bee Keeping Local Laws 2002*.

Owner's Signature: _____ Date: _____

Adjoining Property Occupier Comments on Bee Keeping Application

A. Adjoining Property Occupier Details

Full name _____

Lot: _____ Street No.: _____ Street name: _____

Suburb: _____ Post code: _____

Phone: Home: _____ Mobile: _____ Email: _____

B. Location of Bee Hive(s)

Full Name: _____

Lot: _____ Street No.: _____ Street name: _____

Suburb: _____ Post code: _____

Phone: Home: _____ Mobile: _____ Email: _____

C. Description of Application

Number of hives: _____

Please attach a site plan showing the proposed location where the bees and hives will be kept as per the application.

D. Occupier Comments

I/we have viewed the attached plan(s) and **object** **do not object** for the following reasons:

E. Occupier Signatures

Signed: _____ Print name: _____ Date: _____

Signed: _____ Print name: _____ Date: _____

Signed: _____ Print name: _____ Date: _____

Note: City of Kwinana Environmental Health Services will determine the application and take into account comments of adjoining occupier(s). However, City of Kwinana Environmental Health Services is not obliged to support the views of adjoining occupier(s). If you wish to discuss this matter, please contact City of Kwinana Environmental Health Services on 9439 0250.