

Registration No.:	_(ANIM/BEES) (office use only)	,
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APPLICATION FOR A PERMIT TO KEEP MORE THAN TWO BEE HIVES

* 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.

APPLICATION AND INSPECTION FEE:

	Schedule Rate	Pensioner Rate
Application fee	\$42 (no GST)	\$21 (no GST)
Site inspection fee	\$168 (no GST)	\$84 (no GST)

Expedited Service Fee: \$168 (No GST) (fee type 158)

Do you require approval within 10 business days?

*If yes, the expedited service fee will apply.

Are you applying for pensioner discount?
*If yes, please provide copy of pension card.

Applicant Details

Applicant's full name:					
Address of land on which bee hives are proposed to be located:					
Are you the owner/occupier	of the address:				
Postal address (if different fr	rom above):				
Email:					
	Mobile:				
Details of Bees/Hives					
Number of hives:	Area of land available:	(m²)			
Do you intend to sell the hor *If yes, please complete an a Food Act 2008	ney or bee products? application for registration of fixed food	business to comply with the			

Attachments

Please submit the completed application to health@kwinana.wa.gov.au with the following attachments:

- 1. Please attach a site plan showing proposed location where bees and hives will be kept and the following details are included:
 - a) Setbacks and distances to any thoroughfare, public place or boundary of land

- a. At least 9 metres from any building of any other land;
- b. At least 9 metres from any footpath, street, private street or public places; and
- c. At least 5 metres from boundary of the land.
- b) Flight path (route taken by the bees leaving from or returning to the hive);
- c) A screen or other barrier to prevent bees flying low over a thoroughfare, public place or adjoining land; and
- d) Provision of water supply readily accessible by the bees on the land within 5 metres from the hive.
- 2. 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.*
- 3. Adjoining property occupier's comments to support your application (note: separate form for each property)
- 4. Application for registration of fixed food business to comply with the *Food Act 2008* (for sale of honey or bee products).

Declaration

As the person making this application, I declare that the information contained in this application is true and correct in every particular on behalf of the organisation(s) listed.

The lodgement of an application does not constitute an approval. The City reserves the right to request further information deemed necessary to assess the application in full prior to making a determination.

I consent to this application and understand my legal obligations to comply with the City of Kwin	ana
Animal, Environment and Amenity Local Law 2024.	

Date:

Adjoining Property Occupier Comments on Bee Keeping Application

A. <u>Adjoining F</u>	Property Occupier De	<u>tails</u>		
Full name:				
	Street No.:			
Suburb:		Post code:		
Phone: Home	e:	Mobile:	Email:	
B. <u>Location o</u>	f Bee Hive(s)			
Full Name: _				
	Street No.:			
Suburb:				
Phone: Home	e:	Mobile:	Email:	
C. <u>Descriptio</u>	n of Application			
Number of his	ves:			
		the proposed location where	e the bees and hives will be kept a	as per the
application.	1 3		'	'
D. <u>Occupier (</u>	<u>Comments</u>			
I/we have vie reasons:	wed the attached plar	n(s) and object/do not obje	ct (please circle relevant option) t	for the following
E. <u>Occupier S</u>	<u>Signatures</u>			
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.