BEEKEEPING PERMIT RENEWAL APPLICATION

CITY OF WAUPACA, WISCONSIN

(APPLICANT SHALL COMPLETE ALL ITEMS IN RED.)

PERMIT IS VALID FOR ONE CALENDAR YEAR BEGINNING JANUARY 1, AND ENDING DECEMBER 31. Permits purchased after January 1 in any given calendar year will also expire December 31 of that year; and permit fees will not be pro-rated.

APPLICANT/PROPERTY INFORMATION

Applicant Name: _____ Date: _____

Address (where beehives are to be kept): _____

Mailing Address (if different): _____ Zip: _____

Phone Number: _____ E-mail: _____

☐ Beehives are in the same location

☐ Beehives are in a new location (requires new scaled site plan for new zoning review)

PERMITTING FEES

Permitting fee is $20.00 annually. *(Make checks payable to City of Waupaca)*

REQUEST AND AFFIDAVIT

The applicant must read the following statement carefully and sign below:

I hereby certify that the information submitted is true and correct to the best of my knowledge. In submitting the permit application, I acknowledge and agree the application is subject to all the regulations found in 26.07 Licensing and Regulating of Beekeeping in R-1 and R-2 District, City of Waupaca Municipal Code and further agree to fully comply with said regulations. If the requirements of 26.07 are not complied with, the City of Waupaca may revoke any permit granted.

_____ _____

Applicant Signature Date

_____ _____

Owner Signature Date

FOR CITY STAFF USE ONLY

APPROVAL

Date Received _____ Staff Name _____

Date Approved _____ Signature _____

Fee ___$20.00___ Receipt # _____

Original Permit # _____