



APIARY LICENSE APPLICATION

- New Permit
- Renewal

1. Address & Contact Information

Applicant I am also the property owner

Full Name _____
 Address _____
 City, State, Zip _____
 Phone _____
 Email _____

2. Owner Information

*If the applicant is not the owner, an owner disclosure statement is required.

Property Owner _____
 Full Name _____
 Address _____
 City, State, Zip _____
 Phone _____
 Email _____

3. Property Information

PIN _____
 Current Property Zoning _____
 Current Land Use _____
 Lot Dimensions _____
 Existing Structures (Total Sq. Ft.) _____

4. Department of Agriculture Registration

I have completed the IL Dept. of Agriculture Apiary Registration.
 Reg. #: _____

5. Restrictive Covenants

I certify that my property is not subject to restrictive covenants that prohibit keeping bees or having hives on my property.
 Subdivision Name: _____

6. Municipal Code Violations

I certify that I have no active enforcement actions against my property and am current in all payments to the Village.

7. Apiary Checklist

Has each adjacent neighbor been given a written notice of your intentions? YES NO

Dimensions of hives: _____

Is the apiary located in the rear yard? YES NO

How many hives do you have? _____

Is the apiary set back 10 feet from any lot line? YES NO

*Additional materials may be required during the review process. Incomplete applications will not be processed.

Safety and Maintenance:

- Beekeepers shall requeen colonies that exhibit unusually aggressive behavior.
- Beekeepers shall ensure a source of water is accessible on the zoning lot within 50 ft. of apiary.
- Apiaries shall be maintained so as not to become a nuisance.
- Colonies shall be maintained in movable-frame hives with adequate spacing.
- Apiaries shall be screened to provide a flyway barrier.
- Retail sales of any products on-site is prohibited.

Attachments

- A. Site Plan
- B. Apiary Plan with dimensions
- C. Architectural Elevation/Perspective Drawings.
- D. Owner Authorization Form, if required.

FOR STAFF USE: Application Complete
 Received By: _____
 Date: _____ Permit No.: _____

APIARY LICENSE APPLICATION

8. Applicant Signature

By signing this application, I am certifying that I have read and understand the information outlined in the Bensenville Municipal Code. I have provided the necessary documentation as listed. I certify that I will comply with all standards outlined in Sec. 10 – 7 – 4C – 1 and all applicable sections of the Bensenville Municipal Code.

Signature of Applicant: _____

Date: _____

Owner Authorization Form

*If the applicant is **not** the owner of the property, please have the owner(s) or owner(s)' agent sign the appropriate section and have the signature(s) notarized to authorize said applicant to process the application*

Section I. Owner/Tenant Certification

The undersigned hereby states that she/he/they is/are the Owner(s) of the property that is the subject of the forgoing application for a Apiary Permit, that she/he/they has/have read said application, and that she/he/they hereby authorize(s) _____ to act as the keeper of the apiary for the purpose of keeping bees.

I certify that I am ultimately responsible for my property meeting the standards outlined in Sec. 10 – 7 – 4C – 1.

Section II. Notary

STATE OF _____)
) ss.
COUNTY OF _____)

I, the undersigned, a Notary Public, in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT _____ is/are personally known to me, that said person(s) appeared before me this day in person and severally acknowledged that she/he/they signed and delivered the forgoing Owner Authorization Form as her/his/their free and voluntary act for the uses and purposes therein set forth.

Given under my hand and Notarial Seal this _____ day of _____, 20_____.

Notary Public

NOTARY SEAL

Apiary License Worksheet

The following tips will help you complete the Apiary License Application. Entries correspond to the numbers on the application.

1. and 2. Address and Contact Information and Owner Information

This should be the address/contact information for you, the applicant. If you are also the property owner, check the box and skip number 2. *Owner Information*. If you are not the property owner, you must provide owner contact information. You must also obtain permission from the owner. See the 'Owner Authorization Form' on the back of the application.

3. Property Information

- The parcel identification or PIN number can be found on your property tax record. You can also find this by using the DuPage County's online map tool.
- Current land use describes the way the land is used. For example, the land use could be single-family residential.
- Lot dimensions are the measurement of each side of the lot.
- For existing structures, calculate the square footage of each building on the lot.

4. Department of Agriculture Registration

All applicants must complete a free registration with the Illinois Department of Agriculture. This is to ensure that the Department of Agriculture can contact you in case of an animal emergency or disease outbreak. This form can be completed online at www2.illinois.gov/sites/agr/Insects/Bees.

5. Restrictive Covenants

Restrictive covenants are placed on the deed of the property. This can be found in the property deed or an attached document that lists the restrictions. Many residential developments have restrictive covenants. If you live in a neighborhood with a Homeowner's Association contact the association to learn about covenants on your lot.

6. Municipal Code Violations

If you have active municipal code violations involving your property, a Apiary License will not be issued to you.

7. Apiary Checklist

Apiary standards are established in the municipal ordinance under accessory structures.

Attachments:

A. Site Plan

The site plan should include the following:

- Drawing should be to scale.
- Lot dimensions.
- Location of existing structures on the site.
- Proposed apiary location with setback distances from property lines.
- Distance from the apiary to adjacent homes.

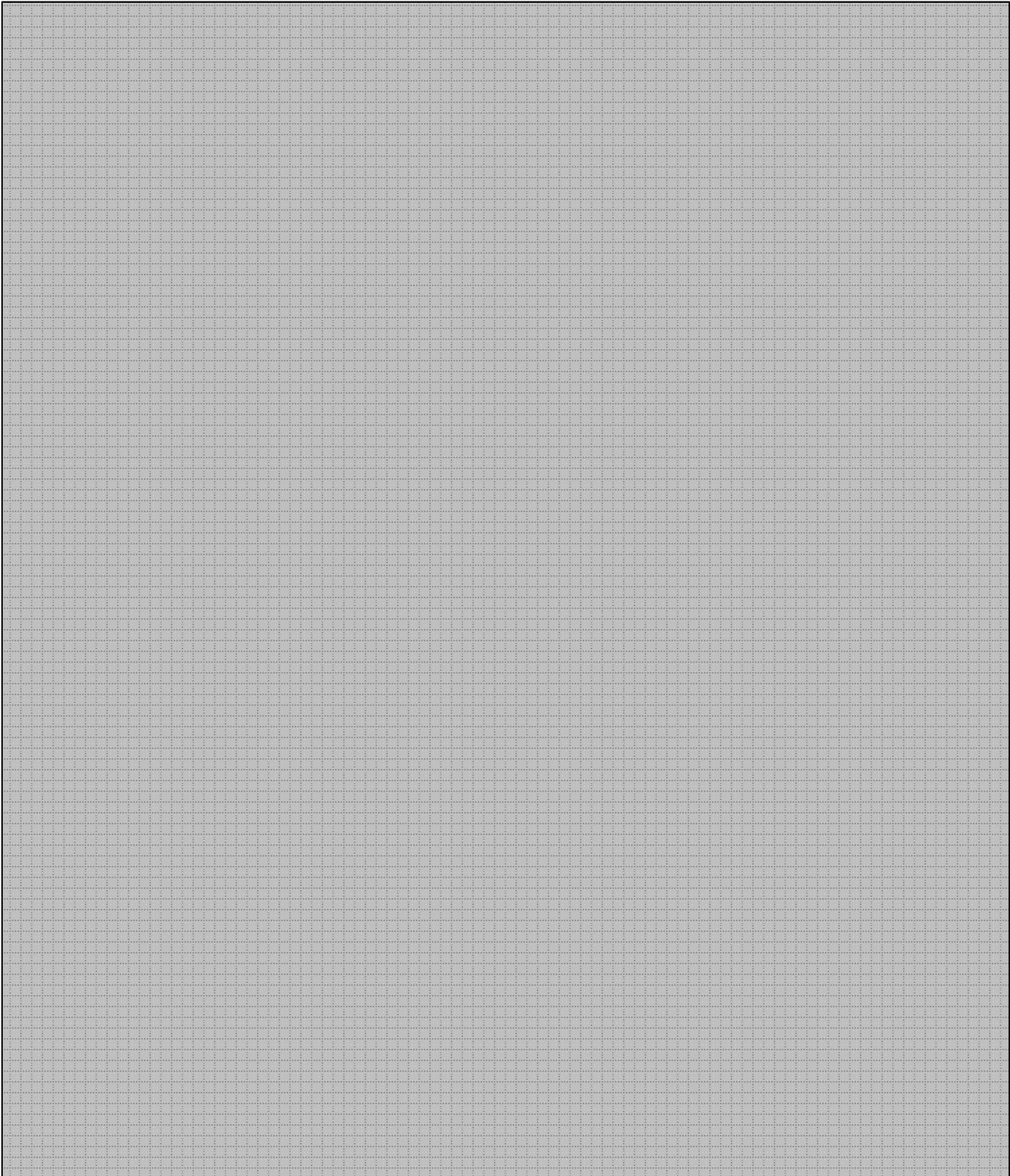
B. Apiary Plan with Dimensions

- This should include the building/structural plan of the hives with dimensions.

C. Architectural Elevation/Perspective Drawings

- Drawings and images should indicate general size/height of the hives.
- If the hive is from a stock plan or is pre-fabricated, photographs can take the place of drawings.

Apiary License Worksheet



**ILLINOIS DEPARTMENT OF AGRICULTURE
 APIARY INSPECTION SECTION
 P.O. BOX 19281 - FAIRGROUNDS
 SPRINGFIELD, IL 62794-9281**

<u>For Agency Use Only</u>	
Registration No. _____	_____
Registration Date _____	_____

APPLICATION FOR APIARY REGISTRATION

TO ALL BEEKEEPERS IN THE STATE OF ILLINOIS:

In compliance with the Illinois *Bees and Apiaries Act*, every person keeping bees must register with the Illinois Department of Agriculture. There is no charge for registration. To register, complete and return this form to the address listed above.

Mr/Mrs/Ms _____
 (Circle one)

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ COUNTY of RESIDENCE _____

EMAIL ADDRESS _____

SIGNATURE _____ DATE _____

* Please consider registering your colonies on DriftWatch at www.driftwatch.org.

APIARY LOCATION INFORMATION

An apiary is any place where one or more colonies of bees are kept. Location of all apiaries must be listed.

Please provide **GPS (Global Positioning System) Coordinates** which are required for registration. They can be obtained from the website www.itouchmap.com/latlong.html. Address and Legal Description (example below) are also helpful.

EXAMPLE OF LEGAL DESCRIPTION: (CAN BE OBTAINED FROM YOUR COUNTY PLAT BOOK OR SIDWELL BOOK IN THE COUNTY RECORDER'S OFFICE OR THROUGH THE GPS TAX BOOK IN THE COUNTY ASSESSOR'S OFFICE)

1/4 1/4 SECTION SW	1/4 SECTION SE	SECTION 27	TOWNSHIP 17 NORTH	RANGE 5 WEST	P.M. 3RD
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Number of Colonies	County	Name of Township	GPS Coordinates, Address and Legal Description (Section, Township, Range)	Landowner or Name of Person at Premises Where the Colonies Are Kept

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under the Illinois Compiled Statutes, Chapter 510, Act 20. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center.