

THE CITY OF
SOUTH BELOIT
I L L I N O I S



Application for Beekeeping/Apiary Permit

Date of Application Submission: _____

Applicant/Owner Name: _____ Telephone #: _____

Email Address: _____

Provide the location, address and PIN:

Total Lot Size: _____ Proof of State Registration: No. _____

Please attach to this application detailed drawings of location of hives, with distance measurements from the hives to the lot lines and residential structures on adjacent properties, water source(s), and sign location indicating “Bees on Premise”. Include dimensions of all structures and setbacks, location of lot lines and location of residential structures on adjacent properties. Plans shall also include any fencing or screening proposed to accomplish the flyway barrier.

A new beekeeping/apiary permit application shall be submitted if the location of the hives change.

*****SEE ATTACHED COPY OF THE CITY ORDINANCE SPECIFYING REQUIREMENTS FOR BEEKEEPING. ANY APIARY MUST BE IN ACCORDANCE WITH CITY ORDINANCES AND APPLICANT IS RESPONSIBLE FOR ADHERING TO CITY ORDINANCES.**

Applicant’s Signature: _____ Date: _____

“AN EQUAL OPPORTUNITY EMPLOYER”



4. All other ordinances of the City shall remain in effect as previously enacted except that those ordinances, or parts thereof, in conflict are hereby repealed to the extent of such conflict.
5. This Ordinance shall be in full force and effect from after its passage, approval, and publication in pamphlet form as provided by law.

PASSED UPON MOTION BY Fitzgerald

SECONDED BY Morse

BY ROLL CALL VOTE THIS 15th DAY OF June, 2020

AS FOLLOWS:

VOTING "AYE": Fitzgerald, Morse, Rehl

VOTING "NAY": _____

ABSENT, ABSTAIN, OTHER Hedrington, Vacant

APPROVED June 15, 2020

ATTEST:

Marcy L. Patrick

[Signature]

CLERK

MAYOR