

Original _____
*50% approval from neighboring property owners
J&A and Council Approval

License Fee: _____

Invoice No.: _____

Renewal _____
J&A Approval

**APPLICATION TO OWN, KEEP AND/OR HONEYBEES
IN THE CITY OF LA CROSSE**

License Period: January 1, ____ to December 31, ____ (fifth year of the licensure period)

APPLICANT:

PROPERTY ADDRESS WHERE HONEYBEES WILL BE KEPT:

PROPERTY OWNER(S):

*If applicant is not the owner, please provide written documentation from the owner that they have been notified.
Not applicable for renewal.*

Is the property _____ ONE-FAMILY dwelling or _____ TWO-FAMILY dwelling? (Check One)

*If two-family, provide written documentation from other occupant that they have been notified.
Not applicable for renewal.*

Attach a scale drawing showing property lot lines, location of apiary and distance from any primary buildings on abutting lots and distance from any public sidewalk(s).

If colony is kept less than twenty-five (25) feet from a property line of the lot upon which the apiary is located, and any entrance to the hive faces that lot line; include location, height and description of flyway barrier required pursuant to Sec. 6-18(c)(1).

*Applying for and obtaining a beekeeping license **DOES NOT** provide any authority to violate any restrictive covenants that govern the property where you reside or intend to keep honeybees. Please review any Declaration of Restrictions or Restrictive Covenants that apply to the property prior to applying for a beekeeping license. No permit fees will be refunded once they are paid.*

The above applicant(s) hereby makes application for a license to own, harbor and/or keep honeybees at the above property address within the City of La Crosse pursuant to provisions of Section 6-18 of the Code of Ordinances for the City of La Crosse.

(signature)

(signature)

(telephone)

(date)