

# CITY OF DULUTH

CITY CLERK'S OFFICE

330 City Hall ● 411 West First Street Duluth, Minnesota 55802-1189 Phone (218) 730-5500 Fax (218) 730-5923

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DATE \_\_\_

LICENSE # \_\_\_\_\_

### LICENSE APPLICATION

Type in your information by tabbing through the boxes below. Print, sign and submit all pages to the address above.

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

LICENSE	FEE
KEEPING OF HONEYBEES	\$10.00

LICENSEE NAME/ADDRESS

PHONE: \_\_\_\_\_

---LICENSE PERIOD: JANUARY 1 TO DECEMBER 31

- - -

NEW LICENSE	RENEWAL LICENSE								
• SEE THE ATTACHED SUPPLEMENT FOR REQUIREMENTS AND REGULATIONS.	CHECK ONE OF THE FOLLOWING: No changes have been made to the hive(s) and flyway barrier location.								
• A SITE PLAN IS REQUIRED.	 Changes have been made to the hive(s) and flyway barrier location. **A NEW SITE PLAN IS REQUIRED**								

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

Signature of Applicant

MAILING ADDRESS:

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## **RETURN THIS SIGNED & DATED SUPPLEMENT WITH APPLICATION**

### OBTAINING A LICENSE TO KEEP HONEYBEES

(a) Any person who keeps honeybees in the city of Duluth other than areas zoned Rural-Conservation (R-C) or Residential-Rural 1 (RR-1) under Sections 50-14.2 and 50-14.3 of this Code, shall obtain an annual license prior to acquiring the honeybees. The license year commences on January 1 and ends on the following December 31. Applications shall be made to the city clerk. The city clerk shall collect the license fee;

(b) Fees to be charged for the issuance of a license to keep honeybees shall be set in accordance with Section 31-6(a) of this Code;

(c) Only one license shall be allowed per lot;

(d) The applicant for the license must notify all residents of the property if the applicant is not the owner or operator and the owner or operator must be an additional signatory on the license application. Notification is not required for renewal of a license;

(e) The animal control authority may refuse to grant or may revoke a license if the honeybees become a nuisance as determined by the animal control authority.

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#### **KEEPING OF HONEYBEES**

(a) Each person holding a license to keep honeybees within the city of Duluth shall comply with the following:

(1) No more than five hives may be located on a lot;

- (2) No hive shall exceed 20 cubic feet in volume;
- (3) A constant supply of water shall be provided for all hives, except during the dormant period;
- (4) No ground hive shall be located closer than five feet from any property line;

(5) No ground hive shall be located closer than 15 feet from a public sidewalk or 30 feet from a principal building on an abutting lot;

(6) A flyway barrier at least six feet in height shall shield any part of a property line that is within 30 feet of a ground hive. The flyway barrier shall consist of a wall, fence, dense vegetation or a combination thereof and it shall be positioned to transect both legs of a triangle extending from an apex at the hive to each end point of the part of the property line to be shielded;

(7) Rooftop apiaries are allowed but shall not be located closer than 15 feet from a principal building on an abutting lot.

You are required to attach a site plan, drawn to scale, of the proposed placement of the hive(s) and flyway barrier showing compliance with all applicable ordinance requirements. An example of a site plan and graph paper are attached for your use.

I hereby affirm and under penalty of perjury, understand the aforementioned terms and conditions of obtaining a license to keep honeybees and that any false statements and failure to comply with the terms and conditions can and will be grounds for revocation of the keeping of honeybees license.

Signature of Applicant

Date

NORTH arrow required Scale: 1"= feet SITE PLAN											DO NOT USE PENCIL														
Site Address:											L	ega	al Do	esci	iptio	on (I	requ	uire	d):						
Owner's Name:													1												
This site plan is an accurate and complete representation of the footprint(s) of all existing and																									
proposed structure(s) and their location(s) on the subject property.																									
Applicant's Signature:																									
Date:																									

