GOVERNMENT DATA PRACTICES ACT - TENNESSEON WARNING:
The data you supply on this form will be used to process the registration you are applying for. You are not legally required to provide this data, but we will not be able to process the registration without it. The data will constitute a public record if and when the registration is granted.

**The following information is required.**
- Registration Period: April 1st – March 31st

The undersigned hereby makes application to the City of Brooklyn Park, Hennepin County, Minnesota, for registration renewal subject to the laws of the State of Minnesota and of the City of Brooklyn Park.

<table>
<thead>
<tr>
<th>Apiary Address:</th>
<th>Property Owner:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner Mailing Address:</td>
<td>Owner Email Address:</td>
</tr>
<tr>
<td>Owner Phone Number:</td>
<td></td>
</tr>
</tbody>
</table>

**Beekeeper’s Information**
- Beekeeper’s Name (If different from above):                                    |
- Contact Phone #:                                                              |
- Emergency Contact:                                                            |
- Emergency Phone #:                                                           |

Have there been any changes to the apiary setup in the previous year: ☐ Yes ☐ No
If yes, please describe and complete the attached Property and Apiary Diagram:

**Please check each box and then sign and date indicating that you have read and agree with the following:**
- ☐ I have received, read and understand city code Chapter 92 (the Beekeeping ordinance) and will comply with all requirements of this ordinance.
- ☐ I understand my apiary will be subject to an inspection upon initial registration, annually for renewal, with any update to my registration and if a complaint is received. (Chapter 92.57)
- ☐ I understand that my apiary location is public information and that a map showing all apiary locations is available to the public.

**Applicant’s Signature:** ____________________________ **Date:** __________

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**CITY USE ONLY - Approvals:**
Complaints Received: ☐ Yes ☐ No  Renewal Inspection needed: ☐ Yes ☐ No
Site Inspection Date: ____________________  ☐ Passed  ☐ Failed

APPROVED: ☐ YES ☐ NO
Approved by: ___________________________________ **Date Approved:** __________
Maximum Number of Colonies/Hives Allowed: ______________
Brooklyn Park Application for Apiary Registration

Property & Apiary Diagram

Please supply a scaled sketch of your property and apiary. The sketch must include the location of your house, accessory structures, your lot lines, all honeybee colonies, the required water source and the location of any required flyway barriers along. Please state how many feet each item is setback from the property’s lot lines.

Examples

For Office Use Only

<table>
<thead>
<tr>
<th>Zoning District:</th>
<th>Hives permitted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot Size:</td>
<td>Acreage:</td>
</tr>
</tbody>
</table>

Flyway Required  □ Yes  □ No

Inspector Assigned: __________________________