



Unique Animal Ownership Application Form – Bees

APPLICANT/OWNER INFORMATION	
FULL NAME:	DATE OF BIRTH:
ADDRESS:	PHONE NUMBER
EMAIL ADDRESS:	OWNER OR TENANT OF PROPERTY? <input type="checkbox"/> Owner <input type="checkbox"/> Tenant

BEE INFORMATION	
APICULTURE PROGRAM REGISTRATION NUMBER:	ALBERTA PREMISE ID (PID) NUMBER:
WHEN DID YOU COMPLETE YOUR BEEKEEPER REGISTRATION WITH GOVERNMENT OF ALBERTA?	
WHERE WILL YOU BE OBTAINING THE PACKAGED BEES, NUCS/COLONIES OR QUEENS FROM?	

APIARY INFORMATION			
HOW MANY APIARY'S DO YOU/WILL YOU POSSESS?	APIARY SIZE	Width(m)	Depth(m) Height(m)

ATTACHED DOCUMENTATION

I have attached the following to my application:

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| <ul style="list-style-type: none"> <input type="checkbox"/> Owner absence plan <input type="checkbox"/> Information on the apiary specifications <input type="checkbox"/> Photos to show the property & apiary location <input type="checkbox"/> If applicant is a tenant: authorization letter from the property owner to allow bees on the property | <ul style="list-style-type: none"> <input type="checkbox"/> Emergency and disaster contingency plan <input type="checkbox"/> Bee keeping training certificate (if applicable) <input type="checkbox"/> Proof of payment of the Unique Animal permit (non-refundable). <input type="checkbox"/> Site plan/Drawings to describe the property and apiary location. |
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The personal information collected on this form is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act (RSA 2000)* It will be used in the operation of the Responsible Pet Ownership Bylaw (#5/2016) for bylaw enforcement purposes and shared with outside organizations for the purpose of reuniting lost animals with owners. If you have any questions about this collection, contact the Information Management/FOIP Coordinator: 10125 100 Avenue, Morinville, AB, T8R 1L6. Phone: 780-939-4361

KNOWLEDGE

Please answer the following questions, if you require more space, please include additional pages:

Please explain how you have sufficient knowledge of bee keeping.

Please explain your prior experience owning/handling bee's.

How will you ensure that the site and apiaries will be properly maintained to prevent negative impacts such as attracting nuisance animals and excessive odors or noise.

Please indicate the addresses of each neighbour that you have informed that you have applied for a Unique Animal Ownership permit.

Please provide contact information for your experienced mentor, who will provide support and guidance for a minimum of one year.

Any additional information that would be helpful to process your request, please include it here:

ACKNOWLEDGEMENTS

Please read and acknowledge the following statements:

1. I acknowledge that I am not permitted to house any bees within Morinville until a permit is issued.
2. I acknowledge that I have read Morinville’s beekeeper guidelines.
3. I acknowledge that I have read the *Bee Act* and its regulations and will comply with them.
4. I agree to provide adequate and appropriate water and opportunities for essential behaviors for the bees to be comfortable and healthy.
5. I agree that I cannot sell the bees or its byproducts.
6. I agree that the bee site shall adhere to good management and husbandry practices and maintain bee’s in such a condition as to prevent swarming, aggressive behaviors and disease.
7. I agree to notify the Town of Morinville immediately of any swarms and or disease that arise that may affect the public and steps taken to rectify the issue.
8. My property has an adequate fence and or structure(s) in place to prevent unauthorized people from accessing the apiaries and bees.
9. I agree to allow the Morinville’s Animal Control Officer’s on my property for an inspection for the purpose of this application and for any future inspections for any requirements related to bees.
10. I agree to comply with the Town of Morinville Land-Use Bylaw for structures on the property.
11. I certify that I will abide by all regulations after I have received my permit, knowing that failures to comply may result in the cancellation of it (or future) permits and enforcement action being taken.
12. I acknowledge that the granting of a Unique Animal Ownership permit shall in no way relieve me from complying with the requirements of the Responsible Pet Ownership Bylaw, bylaws of the Town Morinville, Provincial or Federal Statutes.
13. I understand that I am required to renew my permit and pay any applicable fees, as required.
14. Failure to provide all the required information may result in the application being delayed or denied.
15. I certify that the above information and statements are true and correct to the best of my knowledge. I understand that providing false or misleading information or statements may disqualify my application or permit and may result in prosecution.

APPLICANTS SIGNATURE:	DATE (MM/DD/YYYY):
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Further information regarding unique animal owner rules and regulations can be obtained by contacting Morinville Enforcement Services at 780-939-7831.

Once this application is completed, please send your application with all required attachments to peaceofficer@morinville.ca. Incomplete applications may result in the application being delayed or denied.