

## Application to Keep Bees in an Urban Area under Keeping of Animals, Bees & Poultry Bylaw 2021

To complete this application, you'll need to have the following:

- agreement from adjoining residential property neighbours to hives being placed on your property
- an inspection report from an approved contractor, obtained at the applicant's cost
- a site plan showing where the hives will be placed
- your Assure Quality registration number.

### 1. Applicant details

**Assure Quality registration number:**

*Add*

**Name:**  
(Individual or Company)

*Add*

**Postal address:**

*Add*

**Contact phone:**

Home: *Add*

Mobile: *Add*

**Contact email:**

*Add*


**Applicant signature:**

*Add*

**Date:**

*Add*

## 2. Location of hive(s)

 Attach site plan.

**Number of hives proposed:** *Add*

(Maximum number of occupied hives per urban lot limited to three.)

**Address:** *Add*

**Property owner:** *Add*

**Property owner contact phone:**

Home: *Add*

Mobile: *Add*

**Property owner contact email:** *Add*

**Property owner signature:** *Add*

**Date:** *Add*

**Is the property owner being paid to have beehives on their property?**

Yes

No

If "Yes", please provide details:

 **Make sure you have attached the following to this application:**

- Neighbouring consents supporting the application from any adjoining residential property
- An inspection report from an approved contractor at your cost (the applicant)

**Note:** Written advice of support from occupiers of any adjoining residential property to be provided by completion of the attached form. Support from every neighbour will help the application to be considered more quickly.

### Office administration staff to complete

Licence Granted (subject to conditions on rear of this form) under section 8.1 of the Keeping of Animals, Bees & Poultry Bylaw 2021.

I consider that keeping bees as proposed to be set up and continued in this application is unlikely to become a nuisance to any person or dangerous or injurious to health.

**Name:**  
(Delegated Officer)

*Add*

**Signature:**

*Add*

**Date:**

*Add*

## Adjoining Property Owners' Support for the Keeping of Bees

### 3. Adjoining property owners

I/We being the owners of the property identified below do not consider that the hives proposed will be a nuisance nor dangerous or injurious to health, and support approval for:

**Name of beekeeper:**

to place occupied beehives on the adjoining urban property located at:

**Address of property where hives are to be located:**

**Name/names of persons giving support:**

**Address:**

**Signature:**

**Date:**

In supporting this application I undertake to advise any prospective purchaser of my/our property that occupied beehives are being kept on the adjoining property.

If you have been asked to sign this form but do not support the application, you may contact a Compliance Officer at the Council to discuss any concerns:

Email: [kapiti.council@kapiticoast.govt.nz](mailto:kapiti.council@kapiticoast.govt.nz)

Phone: 04 296 4700

Freephone: 0800 486 486

Post: 175 Rimu Road, Paraparaumu, New Zealand.