

**CITY OF CIRCLE PINES
BEEKEEPING PERMIT APPLICATION**

Fee: \$75.00

Applicant Information:

Name: _____

Address: _____ Email Address: _____

Telephone Number: _____ Cell Phone Number: _____

Lot Size: _____ (Min half an acre)

Number of Colonies: _____ (Max. 2)

Number of hours in training in beekeeping: _____

Please notify Mosquito Control at 651-643-8342 or email mnee.mmcd.org regarding your permit for beekeeping.

Signature _____ Date _____

Paid _____
Date _____
Approved _____

Applicant must submit a written description of the beekeeping permit request and a detailed plan showing the size and location of the hives.