



URBAN BEE AND CHICKEN LICENCE APPLICATION

1907 - 21 Avenue, P.O. Box 609, Nanton, AB, T0L 1R0

p 403.646.2029 f 403.646.2653

www.nanton.ca

Pre-application meetings ARE NOT REQUIRED for a Bee or Chicken License.

This application form must be completed with all requirements (unless otherwise discussed with staff).

OFFICE USE ONLY:

| | |
|---|--------------------|
| Roll Number: | File Reference: |
| Lot Size – 0.3 Acres or Greater (circle): Y / N | Land Use District: |
| Date Received: | Approval Date: |

APPLICANT / AGENT INFORMATION

| | | |
|------------------|----------|------|
| Applicant Name: | | |
| Mailing Address: | | |
| Email: | | |
| Phone 1: | Phone 2: | Fax: |

PROPERTY INFORMATION

| | |
|---|--|
| Property Owners(s) (name all on title): | |
| Civic address: | |
| Legal description (Lot, Block, Plan): | |

PROPERTY OWNER SIGNATURE / PERMISSION LETTER

You must provide either property owner signature below OR permission letter from the property owner authorizing the agent to sign the application form.

Property owner signature

OR ☐ Permission letter from the property owner is attached.

Date: _____

RIGHT OF ENTRY

In accordance with the *Municipal Government Act*, I hereby authorize the Town of Nanton to enter the above property for the purpose of conducting a site inspection(s) pursuant to bylaw regulation.

Property owner signature

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The information collected via this form is being collected by the Town of Nanton pursuant to legislation governing the information handling practices of the Town of Nanton, specifically Sections 33 (a) and (c) of the *Freedom of Information and Protection of Privacy Act* (Alberta), the *Municipal Government Act* (Alberta), and other legislation or bylaws governing the municipality, as may be applicable. By signing this document, you acknowledge that, in accordance with Section 17(2)(g) of the Freedom of Information and Protection of Privacy Act your name, address and other details related to your permit may be made available to the public. Should you have any questions related to the collection or disclosure of your personal information, please contact the Chief Administrative Officer at the Town Office.

ITEMS TO BE SUBMITTED (ADMINISTRATIVE)

| One hard copy OR PDF file (USB key or e-mail - billing@nanton.ca) | CHECK BOX IF ITEM IS PROVIDED | CHECK BOX IF ITEM IS NOT APPLICABLE |
|--|-------------------------------|-------------------------------------|
| Applicable Fee | <input type="checkbox"/> | <input type="checkbox"/> |
| Registered owner's signature on this form or a Letter of authorization from the registered owner. | <input type="checkbox"/> | <input type="checkbox"/> |
| Colour photographs showing proposed location of bee/chicken enclosures(s). | <input type="checkbox"/> | <input type="checkbox"/> |
| Letters of support from all adjacent neighbours/landowners OR evidence that all adjacent neighbours/landowners have been contacted for their views and given reasonable opportunity to respond. | <input type="checkbox"/> | <input type="checkbox"/> |
| Premises Identification Number through Alberta Agriculture and Rural Development _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you taken an urban beekeeping or urban chicken keeping course (as applicable)? COURSE DATE: INSTRUCTOR: <i>If not, written evidence of alternate experience must be attached.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| Property Site Plan showing: | | |
| a) North arrow | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Civic address and legal description | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Plot and dimension of property lines | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Location of proposed bee/chicken enclosure(s) compliant with all bylaw regulations. | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE: Additional documentation may be required from the applicant after Town staff have reviewed the submitted application. **Do not** purchase animals or begin enclosure construction until a license has been issued.

| | |
|---|--|
| Applicant Signature _____ (confirming that all information provided is complete) | Staff member reviewing application package _____ |
| Date: _____ | Date deemed complete: : _____ |

OFFICE USE ONLY

Approved by the Chief Administrative Officer/ Designate: **YES** / **NO** (Circle one)

Reason(s) if application is denied:

Stamp/ signature: