



McHenry County
Department of Planning and Development

www.mchenrycountyil.gov/plandev

OFFICE: McHenry County Admin. Bldg.
667 Ware Road, Woodstock, Illinois

MAIL: 2200 N. Seminary Ave.
Woodstock, Illinois 60098

EMAIL: plandev@mchenrycountyil.gov
Ph: 815-334-4560 Fax: 815-334-4546

APPLICATION FOR NON-AGRICULTURE BEE KEEPING

Applicant Name: _____

Applicant Address: _____

Applicant Phone: _____

Location of Hives: _____ PIN: ____-____-____-____

Property Owner Name, Address, and Phone, if different than applicant:

PLEASE ATTACH A DIMENSIONED SITE PLAN INDICATING THE LOCATION OF THE PROPOSED HIVE STRUCTURE(S) AND FLYAWAY BARRIER WITH DISTANCE FROM LOT LINES.

I, _____, acknowledge the following regulations and penalties associated with non-agriculture bee keeping:

- Registration with the Illinois Department of Agriculture is required.
• All bee colonies shall be kept in a removable frame hive, which shall be kept in sound and usable condition.
• Where any colony is situated within twenty-five (25) feet of a property line, as measured from the nearest point on the hive to the property line, the beekeeper shall establish and maintain a flyaway barrier at least six (6) feet in height consisting of a dense vegetation, fence, solid wall, or combination thereof that is parallel to the property line and extends ten (10) feet beyond the colony in each direction so that all bees are forced to fly at an elevation of at least six (6) feet above ground level over the property lines in the vicinity of the apiary.
• A convenient source of water shall be available to bees at all times.
• If, at any time, a colony exhibits unusual aggressive characteristics by stinging or attempting to sting without due provocation or exhibits an unusual disposition toward swarming, the colony will be re-queened.
• All hives shall be located to meet required setbacks for accessory structures, unless screening is provided or unless the adjacent property is vacant.

THIS APPLICATION AUTHORIZES MCHENRY COUNTY TO ENTER THE PROPERTY TO PERFORM INSPECTION(S).

Signature

Date

Zoning Approval _____ Date _____ Comments: _____

Stormwater Approval _____ Date _____ Comments: _____