

## HWDAA Beekeeping policy – request to keep bee hives on an HwDAA Allotment Site

<b>Surname:</b>			
<b>First Name(s)</b>			
<b>Title:</b>	Mr/Mrs/Ms/Dr/Other:		
<b>Site:</b>		e.g. AM, MD, KL1, KL2, BA, WC	<b>Plot No:</b>
<b>Describe the number of hives and where they will be located:</b>			
Continue on separate sheet if required.			
<b>I have discussed keeping bees on my plot with my neighbouring plot holders and they are happy about this.</b>			<b>Yes    No</b>
<b>Beekeeping experience: (tick one)</b>			
<b>Beginner*</b>	I have not kept bees before.	<input type="checkbox"/>	
<b>Novice</b>	I have kept bees for 1 year or under.	<input type="checkbox"/>	
<b>Competent</b>	I have kept bees for 1 to 3 years.	<input type="checkbox"/>	
<b>Experienced</b>	I have kept bees for 3 years or more.	<input type="checkbox"/>	
<b>*As a beginner my mentor will be:</b>	Name:	Contact details:	
<b>Beekeeping training course(s) undertaken:</b>		<b>Date:</b>	<b>Course run by:</b>
Basic beekeeping course:			
Other beekeeping course(s):			
<b>I am a member of the following beekeeping organisation: e.g. Bristol Beekeepers Association **</b>		<b>Date Joined:</b>	
Organisation			
Organisation			
Organisation			

**Any other facts that will help the committee to make its decision:**

Continue on separate sheet if required.

**I have read and understood the HwDAA Beekeeping policy.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Please complete and sign this form and forward it to:**

**The Secretary HwDAA  
2 Kennel Lodge Road  
Bower Ashton  
BRISTOL  
BS3 2JT  
Or pass to your Site Rep.**

**\*\* Evidence may be required**

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