



Department of **Biodiversity,
Conservation and Attractions**



Application to temporarily use an apiary authority which is currently not being used by the authorised holder

This application applies to beekeepers who wish to occupy another beekeepers' registered apiary sites on all Crown lands in Western Australia. Please note that the process can be lengthy and this factor should be considered when planning your business. Please contact the Department of Biodiversity, Conservation and Attractions (DBCA) Apiary Coordinator on 9219 8765 if you have any questions.

We (the authority holder and the proposed temporary occupier) accept that the temporary occupier shall comply with the apiary authority general conditions or any special conditions which apply to each permit or licence for the site(s) being occupied.

Name of Authority Holder					
Company Name					
Note: The application must be made by an individual or a company proposing to undertake the activity (activities) for which the authority is sought. The application cannot be made using a trading/business name.					
Trading name					
Address (residential)					
				Postcode	
Address (postal) If different from above					
				Postcode	
Phone		Fax		Email	
Website			Mobile		

Please list Apiary site authority/ties to be temporarily occupied: _____

I/we the authority holder/s, agree to the proposed occupier temporarily occupying any of the above authorities from:

Date from:		Date to:	
Signature of authority holder/s:		Date:	

Name of Temporary Occupier					
Company Name					
Note: The application must be made by an individual or a company proposing to undertake the activity (activities) for which the authority is sought. The application cannot be made using a trading/business name.					
Trading Name					
Address (residential)					
				Postcode	
Address (postal) If different from above					
				Postcode	
Phone		Fax		Email	
Website			Mobile		
Temporary Occupier's signature:				Date:	

DEED POLL

I/We:

hereby apply for an apiary authority//authorities to enter upon and use the land within the sites specified in this application and understand and agree that the authority/authorities, if granted, will be subject to the provisions of the *CALM Act 1984* and all regulations and subsidiary legislation made under it.

I certify to the best of my knowledge that the information provided within this application is true and correct in every detail.

I understand that the permit/licence if granted may not be automatically renewed.

I have read, understood and agree to abide by the general conditions contained within DBCA General Conditions for using Apiary Authorities on Crown land in Western Australia. I understand that further conditions relevant to the sites proposed in this application may apply.

I hereby agree to release and indemnify, and keep indemnified, the State of Western Australia (**State**), the Chief Executive Officer of DBCA (**CEO**), and each of the employees, contractors and agents of the State or DBCA (**Indemnified Parties**) from and against all Claims and Costs which may be made or brought against, suffered or incurred by any of the Indemnified Parties arising in any way from, or in connection with the conduct of the applicant or any of its employees, agents, contractors, of the operation the subject of this application:

- on any lands to which the *CALM Act 1984* applies; or

I certify that the applicant's public liability insurer is aware of the conditions that would apply to this permit/licence and the indemnity granted above. I confirm that the applicant's public liability policy also covers the operation and activities that are specified in this application form.

I declare that I am not currently bankrupt, or have executed an arrangement under Part X of the *Bankruptcy Act 1966* or, if a company is involved with any part of the submission, the company is not in receivership or some other formal arrangement with creditors.

Executed as a deed on:

DATE

<p>Natural person</p> <p><input type="checkbox"/></p> <p>(Check box)</p>	<p>Signature: _____ Name: _____</p> <p>Witness: _____ Name: _____</p>
<p>Company Pty Ltd (executed in accordance with section 127(1) of the <i>Corporations Act 2001</i> (Cth))</p> <p><input type="checkbox"/></p> <p>(Check box)</p>	<p>_____ Signature of director or secretary Name: _____</p> <p>_____ Signature of director Name: _____</p> <p>_____ Witness Name: _____</p>
<p>Incorporated Association (executed in accordance with section 14(1)(b) of the <i>Associations Incorporation Act 1987</i> (WA))</p> <p><input type="checkbox"/></p> <p>(Check box)</p>	<p>_____ Signature of person with authority to bind the Incorporated Association Name: _____</p> <p>_____ Witness Name: _____</p>

Submitting your form

This form must be completed by both parties and sent to:

Apiary Coordinator

Department of Biodiversity, Conservation and Attractions

Locked Bag 104 Bentley Delivery Centre WA 6983

Fax: (08) 9219 8221

Email: apiary@dbca.wa.gov.au.