

Thank you for your interest in conserving pollinators and enhancing our planet's resilience!

Our Mission

To galvanize communities to sustain pollinators, responsible for the reproduction of 90% of the world's wild plant species, by providing them with healthy habitat, rich in a variety of native plants and free to nearly free of pesticides.

How the BEE CITY USA® Certification Program Works: Step-by-Step

 (Applicant) Email a completed, signed application (form below) with draft resolution (template provided) to beecityusa@gmail.com with "APPLICATION" in the subject line, and mail a check for the application fee to BEE CITY USA, 34 Courtland Avenue, Asheville, NC 28801. Note: Businesses, civic groups, and local government departments are often willing to pay the application fee. The fee helps BEE CITY USA engage communities across the nation in enhancing pollinator habitat and is based on a sliding scale keyed to your community's population:

Initial & Annual Fee
\$100
\$150
\$200
\$300
\$400
\$500
\$750
\$1,000
\$1,500

- (BEE CITY USA) We will notify you of any further needs or adjustments. Upon a favorable
 review, we will place your application in PENDING APPROVAL status and notify you. Our goal
 will be to synchronize the social media announcement process with the adoption of your
 resolution.
- (Applicant) Once your community passes the resolution, send a signed electronic copy to us, noting any changes to the draft you submitted with your application.
- 4. (BEE CITY USA) After reviewing your adopted resolution, we will promptly request any clarification necessary, and given a satisfactory response, formalize your status as APPROVED by email, add your community to the list of certified Bee City USA affiliates on our website, and send artwork to produce your BEE CITY USA street sign(s). Affiliates are referred to as "Bee City USA [your community name here]".
- 5. (Applicant) Keep BEE CITY USA apprised of your news, questions or needs. Each January after you have been certified at least twelve months, email BEE CITY USA an annual renewal application, including a report of activities from the previous year and mail BEE CITY USA an annual renewal payment (based on the fee schedule above) to help support the program's administration and maintain your status. (Note: All photographs submitted to BEE CITY USA will be used for promotional and educational purposes without compensation.) Enjoy the benefits of belonging to a network of communities taking a stand for pollinators and serving as resources to one another!

Bee City USA is an independent 501(c)(3) non-profit organization.

Questions? Contact Phyllis Stiles, Director, BEE CITY USA at beecityusa@gmail.com.



APPLICATION

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BEE CITY USA, 34 Courtland Avenue, Asheville, NC 28801.

A) APPLICANT INFORMATION

Email

APPLICANT ENTITY VILLAGE OF RIDGEWOOD POPULATION 24,958 / APPLICATION FEE \$200 APPLICANT [person completing form and facilitating proposed BEE CITY USA program] Frank Mortimer, Jr. Name Title President Organization/Department Northeast NJ Beekeepers Association Address 426 Van Buren St. City/State/Zip Ridgewood, NJ 07450 (201) 417-7309 Phone Email frankmort@gmail.com SPONSORING DEPARTMENT Parks and Recreation (City and/or County Department serving as interface between BEE CITY USA and City and/or County.] CITY OR COUNTY LIAISON [Employee representing City/County Department serving as interface between BEE CITY USA and City and/or County.] Check here if same as Applicant Name Nancy A. Bigos Title Assistant Director Parks and Recreation Department Address 259 N Maple Ave City/State/Zip Ridgewood, NJ 07450 Phone 201-670-5560 Fmail nbigos@ridgewoodni.net MEDIA CONTACT FOR YOUR BEE CITY USA News, IF NOT APPLICANT OR CITY/COUNTY LIAISON Check here if same as Applicant Check here if same as Liaison Name Frank Mortimer, Jr. Title President Northeast NJ Beekeepers Association Department Address 426 Van Buren St. City/State/Zip Ridgewood, NJ 07450 Phone 201-670-5560

frankmort@amail.com

MAYOR OF CITY OR CHAIR OF COUNTY COMMISSION (I.E. Applicant's highest elected official)

Name Susan Knudsen

Title Mayor

Email <u>sknudsen@ridgewoodnj.net</u>

B) COMMITMENTS AND ACTIONS

I/we, the undersigned, understand that the BEE CITY USA program consists of commitments outlined in the Bee City USA resolution, and that we are taking the indicated actions to support those commitments:

: Adopt BEE CITY	USA resolution following	template pr	rovided by	BEE CITY USA.
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$oxed{oxed}$ Draft Resolution (with exact language to be voted on) is attached.	
The Resolution is scheduled for approval on(date).	

Assign BEE CITY USA facilitation responsibilities to a new or existing committee managed by either the City and/or County or a non-profit organization, as outlined in BEE CITY USA resolution.

The committee should invite broad-based community involvement in your quest to make your community as pollinator-friendly as possible. Ideally, in addition to representatives of city/county departments and members of garden clubs and service groups, committees should include experts in volunteer engagement, native plants, invasive exotic plant removal, pollinators (wild bees, honey bees, butterflies, monarch butterflies, etc.), and least toxic integrated pest management. The committee should have a chair, vice chair, and secretary to take minutes and other officers as needed. Facilitation responsibilities are listed in the resolution template.

Name of committee Northeast New Jersey Beekeepers Association

Date committee was first convened: June 18, 1971

Meeting schedule: The third Friday of every month.

List of committee officers:

NAME	AFFILIATION OR EXPERTISE	EMAIL ADDRESS
Frank Mortimer	President	frankmort@gmail.com
Rich Schulger	Vice President	rick42 98@yahoo.com
John Gaut	2nd Vice President	john.a.gaut@gmail.com
Karl Schoenknecht	3rd Vice President	kschoenk@msn.com
Robert Jenkins	Treasurer	bobrita@usa.net
Jaimie Winters	Secretary	jaimw@aol.com
Nancy A. Bigos	Liaison to Village of Ridgewood	nbigos@ridgewoodnj.net

C)	SIGNATU	RES
AP	PLICANT:	

Signature:

Name: Date: Frank Mortimer, Jr.

APPLICANT): Signature:

Name: Date: Maria M

Nancy A. Bigo

CITY AND/OR COUNTY LIAISON (IF DIFFERENT FROM