



COUNTY OF PLACER

AGRICULTURAL COMMISSIONER SEALER OF WEIGHTS & MEASURES

JOSHUA P. HUNTSINGER
Agricultural Commissioner/Sealer

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2020 APIARY REGISTRATION

California Food and Agricultural Code, Section 29040 requires apiaries to be registered with the Agricultural Commissioner January 1 each year. To register bee hives, registrants will need to provide: their home county, beekeeper information (name, address, phone number), pesticide applicator notification method, and **\$10** fee to their home county. To register your bee hives please submit this form and \$10 to the address above or register online at beewhere.calagpermits.org and submit \$10 to your home county

NAME:	PHONE:	CELL:
DBA:	FAX:	
EMAIL:		
STREET ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS:		
CITY:	STATE:	ZIP:

HOBBYIST: 9 or fewer colonies, not in the business of beekeeping, **must register but fee waived.**

PESTICIDE NOTIFICATION INFORMATION: Please indicate your preferred notification method.

EMAIL PHONE CELL

For notification by phone/cell please indicate at least a two hour time frame you would prefer to receive calls:

WATER SUPPLY: Is a fresh, adequate water source available or provided for your hives at all locations, at all times?

YES NO

REGULAR HIVE CHECK: Are you regularly opening your hives to check for the presence of the known queen, health of your hives, and/or prevention of apiary pests/diseases?

YES NO

IDENTIFICATION INFORMATION ON HIVES: Do you have contact information (name, address, phone number) on your hives if located on a site not resided on by you?

YES NO

FLYOVER BARRIER: If your hives are located on a residential-agriculture (RA) zoned parcel and placed within 25' of the property line do you have a flyway barrier at least 6' in height consisting of a solid fence or dense vegetation? The barrier must extend 10' beyond each bee hive.

YES NO

NEIGHBOR'S USE OF PROPERTY: I will ensure that bees from my apiary are NOT entering adjacent properties in an amount to create a nuisance to my neighbors and their pets in outdoor activities and the normal use and maintenance of their property.

REGISTRANT'S INITIALS: _____

DATE: _____ SIGNATURE: _____
Beekeeper

DATE: _____ SIGNATURE: _____
Agricultural Commissioner/Representative

Indicate apiary locations on back of form

