West Virginia Department of Agriculture
Animal Health Division - Apiary Section
1900 Kanawha Boulevard, East
Charleston, WV 25305
P: (304) 558-2214 F: (304) 558-2231 State Apiarist's Cell: (304) 840-3236

REGISTER ONLINE AT WVAPIARY.WVDA.US

Annual Application for Apiary Registration: July 1-June 30

As required by the Code of West Virginia, Chapter 19, Article 13

Apiary/Farm Name:		County where **beekeeper** resides:		
Apiarist Name:		**Address & Counties** where apiaries are located: (If different from residential. If more room is needed, write on back)		
Mailing Address:				
City:	State:			
Zip Code:				
Phone:				
Cell Phone:				
Email:				
An Inspection is REQUIRED for:	☐ Interstate Movement *(to another state)* If you need service, please contact our office	☐ Sale of honeybees or queens *(within WV)*		Courtesy Inspection for: ☐ New Beekeeper

Number of Colonies at time of Application: _____ Number of Apiaries: _____

Total Number of Colonies Lost During: Summer: _____ Winter: _____

What Caused Losses? (If known, enter number of colonies lost) Mites: _____ Starvation: _____ Queen Failure: _____ Other: _____

Number of increases (if any) in colonies: Splits: _____ Nucs: _____ Packages: _____ Swarms: _____

Honey Produced Last Year: _____ lbs. Variety (Locust, Clover, etc.): _____

If you are no longer keeping bees, provide your name and address and check this box so we can remove you from our mailing list ☐

At any time beekeepers needing assistance or those who have detected diseases or pest invasion, can call WVDA Apiary Section at (304) 558-2214 for inspection/assistance. The WVDA is committed to maintaining and promoting healthy colonies in West Virginia for honey production, the sale of bees and pollination.

Date _____ Signature _____

***SWARM LIST* (This section is voluntary)**

If you wish to be included on a "Swarm List," enter the county(ies) you are interested in:

Swarm List Only _____ Cut-Outs & Swarms _____

Your name, county and telephone number will be made available to the public for the purpose of removing swarms.

***Honeybee Best Management Practices* (This section is voluntary)**

I have read the "West Virginia Honey Bee Best Management Practices" as written in §61-2-4, Limits on Liability, and will adhere to this Voluntary program.

For additional information regarding this program visit the WVDA webpage, **agriculture.wv.gov**, Divisions/Animal Health/Apiary and follow the applicable hyperlink.

☐ Yes, I will participate _____

Signature