## SOLANO COUNTY AGRICULTURE DEPARTMENT ANNUAL APIARY REGISTRATION FORM

California Food and Agriculture Code Section 29040 requires all beekeepers, apiary owners, apiary operators or any person in possession of any apiary to register their apiaries and the number of colonies in each apiary with the Agricultural Commissioner's Office in the county where they are located.

### YEAR OF REGISTRATION: 20 Expires December 31st of the year of registration

Please complete this registration form and submit it to the Solano County Agriculture Department by mail or in person. If your home (primary location) county is in Solano County, please submit your annual registration.

Mail To: Solano County Agriculture Department 675 Texas Street, Fairfield, CA 94533		In Person: 2543 Cordelia Road, Fairfield, CA 94534				
Name:			Business Name:			
Address:			City:		State: ZIP:	
Telephone (Primary):	Telephone (Mol	bile):	Email Address:			
Brand Number(s):			e included in our honeybee swarm pick up referral directory re you can pick up swarms:			
	LOCAT	ION OF API	ARIES IN SOLANO CO	DUNTY		
☐ All Apiary Locations	ifornia.com/). The and Related Info	rmation are is is the mo rmation are	HECK ONE BOX)  Provided and current  St preferred and recon  attached and provide  All information will be	mmended ned on the "A	nethod. Apiary Loca	
	•		PESTICIDE NOTIFICAT	•		
I hereby request to be noti Agriculture Code and Title				tion 29101 of	the Californ	ia Food and
I am available for notificatifrom a.m/p.m			<u>0 a.m.</u> and <u>8:00 p.m</u> .; er to be notified by <b>□</b> pho			
I understand that I may be	contacted by phone	e, text or em	ail based on all of the inf	formation I ha	ave provided	d above.
I understand that if I fail to 72 hours after relocation, apiaries or am not availa "REQUEST FOR NOTIFIC	I may not be entitle able for notification	ed to recover during the	damages if I fail to prop time period I have des	perly post an signated abo	identification	on sign at my
Beekeeper Name		Beeke	eper Signature		Date	
Commissioner or Represer	ntative Name	Comm	issioner or Representative	Signature	Date	Received

### SOLANO COUNTY APIARY REGISTRATION APIARY LOCATION LIST SUPPLEMENTAL

#### YEAR OF REGISTRATION: 20\_\_\_\_

Expires December 31st of the year of registration

**Business Name:** 

Apiary Location List Supplemental _	of	_ pages.
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Name:

All information provided will be input into Bee Where, which requires that apiary locations are input into a Geographical Information System (GIS) web-based database. All location information is held confidential and only contact information is provided to pesticide applicators for the purposes of pesticide notification.

It is preferred and recommended that apiaries and their corresponding numbers of colonies (hives) are input and updated by registrants into Bee Where (<a href="https://beewherecalifornia.com/">https://beewherecalifornia.com/</a>). Department staff are available if you need assistance or have questions in setting up an account or inputting location information into Bee Where.

If you do not wish to set up your account and input your apiaries into Bee Where, please complete the below information for all apiary locations and attach a clear and accurate map, preferably computer generated (i.e. Google Maps), for each apiary. If submitting a hand drawn map, please provide the direction and approximate distances of hives to related landmarks. Please ensure that all related roads, canals, landmarks, ranches, etc. are clearly labeled. If a map is not clear and accurate enough to be input into Bee Where, the registrant will be contacted to assist Department staff in ensuring the location is properly documented.

LOCATION OF APIARIES IN SOLANO COUNTY (PLEASE ATTACH MAPS FOR EACH SITE.)

Location Number or ID	Number of Colonies (Hives)	GPS Coordinates (if available)	Nearest City	Location Description (ADDRESS or APN – preferred or location information such as crossroads, landmarks, canals, ranch names, etc.)	Map Attached/ Provided?
					☐ Yes ☐ No
					☐ Yes ☐ No
					☐ Yes☐ No
					☐ Yes☐ No
					☐ Yes
					☐ No☐ Yes☐
					☐ No☐ Yes☐
					☐ No☐ Yes
					☐ No☐ Yes
					☐ No☐ Yes
					☐ No

# SOLANO COUNTY APIARY REGISTRATION APIARY LOCATION MAP

Name:\_\_\_\_\_ Business Name:\_\_\_\_

Please attach either a computer-generated map (preferred) or draw a map using this form for each apiary location which corresponds to its location/ID number in the Apiary Location List Supplemental Form. If you have more than one apiary location and wish to hand-draw a map using this form, please make enough blank copies to draw a map for each location. When drawing maps, please ensure that all roads and landmarks are clearly labeled and distance from hives is accurate. Indicate which direction is north by placing an arrow in the circle. This map will be used by our staff to input into Bee Where and therefore must be legible and easy to read. If a map is not clear and accurate enough to be input into Bee Where, the registrant will be contacted to assist Department staff in ensuring the location is properly documented.				
Location Number or ID (must correlate to "Apiary List Supplemental Form"):				
LOCATION NUMBER OF ID (must correlate to "Apiary List Supplemental Form"):	Draw an arrow to indicate the direction North			