



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGRICULTURE
 BUREAU OF PLANT INDUSTRY- APIARY SECTION

APPLICATION FOR APIARY REGISTRATION

Name: _____ **If previously registered**
Beekeeper ID #: _____
 Address: _____
 City: _____ **State** _____ **Zip** _____
 Telephone: _____ **Email** _____

Apiary	Number of Colonies	County	Township	Location	Property Owner
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Check Applicable Box:

I no longer keep honey bees in the Pennsylvania
 I have already completed a registration form (registration number issued: _____)

Signature

Date

Complete and send form with a \$10.00 registration fee payable to the Commonwealth of Pennsylvania.