



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.