



COUNTY OF SAN LUIS OBISPO
Department of Agriculture/Weights and Measures

2156 SIERRA WAY, SUITE A • SAN LUIS OBISPO, CALIFORNIA 93401-4556
MARTIN SETTEVENDEMIE (805) 781-5910
AGRICULTURAL COMMISSIONER/SEALER FAX: (805) 781-1035
www.slocounty.ca.gov/agcomm AgCommSLO@co.slo.ca.us

APIARY REGISTRATION

Please complete the following information and mail to the address above, along with a check for \$10.00 made out to "Agricultural Commissioner".

Name of Beekeeper: _____

Address: _____
Street City State Zip Code

Email: _____

[] Please check here and return if you no longer have bees in this county.

Bees sold to: _____

Address City State Zip Code Phone No.

Table with 3 columns: Number of Colonies, Location description, and Section, Township, Range. Includes instructions for plotting location on a map.

REQUEST FOR PESTICIDE APPLICATION NOTIFICATION

I request to be notified prior to a pesticide application which could be hazardous to bees per Sections 29100 – 29103 of the California Food and Agriculture Code (FAC) and Section 6654 of the California Code of Regulations (CCR).

I can be reached the following ways (include days and times if applicable): _____

FAC Section 29040 requires the registration of apiaries located within the state on the first day of January of each year. I understand if I fail to comply with FAC Sections 29070 (Notification requirements), 29043 (Registration requirements) and 29046 (Apiary identification requirements), I am not entitled to recover damages for any loss incurred from pest control operations (as per FAC Section 29047). This Request for Pesticide Application Notification expires December 31 of the current year.

Beekeeper: _____
Print Name Signature

Date: _____

Agricultural Com. Rep.: _____
Print Name Signature

Date: _____