



APPLICATION FOR APIARY REGISTRATION 2017

PLEASE RETURN APPLICATION WITH PAYMENT BY JUNE 1

IDENTIFICATION NUMBER:

CERTIFICATE NUMBER:

Form with fields for COMPANY, NAME, ADDRESS, CITY, STATE, ZIP, PHONE, EMAIL, COUNTY, and checkboxes for Registered previously, Additional Locations, and New beekeeper.

PAYMENT REQUIRED with APPLICATION:

Remittance of \$5.00 per apiary LOCATION payable to the "Ohio Department of Agriculture".

Number of Locations: _____ @ \$5.00 each = Total Amount Due \$ _____ .00

Payment by check or money order only; Payment Method: [] Check# _____ [] Money Order # _____

PLEASE DO NOT SEND CASH. Applications postmarked After June 1st are subject to a \$10.00 late fee.

Table with 7 columns: Hive Location, # of Colonies, COUNTY, Township, Location Information (Address, City, Zip Code), Property Owner's Name, and Beekeepers; IF You are SELLING Queens or Nucs at this location. Rows 1-5.

(*GPS Coordinates are helpful and appreciated; please indicate by Longitude and Latitude, in Decimal Degrees.)

My signature below certifies that the information provided above is true and accurate to the best of my knowledge.

SIGNATURE: _____ DATE: _____