



**COUNTY OF HUMBOLDT
AGRICULTURAL COMMISSIONER'S
OFFICE APIARY REGISTRATION**

PLEASE PRINT _____ Please check here and return if you no longer have bees in the County of Humboldt

Name				
Address			Brand Number:	
City	State	Zip	Phone:	
Number of	Description (*see below)	Section	Twmsp	Range

*Describe location so it can be plotted on county map using roads, canals, intersections, landmarks and ranch names, giving direction, distance and side of road; or show Quarter Section, Section, Township and Range.

ATTACH ADDITIONAL LIST IF NEEDED

Check one: _____ No, I do not request pesticide notification.
 _____ Yes, I do request pesticide notification. If Yes, Complete lower portion.

PLEASE COMPLETE ABOVE REGISTRATION FORM

I hereby request to be notified before pesticide applications as provided for in Section 29101 of the California Code of Regulations and Title 3 California Administrative Code Section 6654.

The beekeepers must be able to receive messages between 8:00 AM and 5:00 PM, 7 days a week. Information regarding the intended application is given to the beekeepers. It is the beekeepers responsibility to notify the pest control applicator within 24 hours that the application can commence.

I understand that if I fail to submit my request for pesticide notification to the Agricultural Commissioner **in writing** within the 72 - hour period before relocating, I may not be entitled to recover damages for any injury from pest control operations. I also will not recover damages if I fail to properly post an identification sign at my apiaries or am not available for notification at the hours I have designated above. I understand that this "REQUEST FOR NOTIFICATION" will expire next December 31 of each year.

Date _____

Signature _____
 Beekeeper

Date _____

Signature _____
 Agricultural Commissioner/Representative

Please return to: Humboldt County Department of Agriculture, 5630 South Broadway, Eureka, CA 95503
 (apfee)