

WVDA State
 Specialists/Inspectors
 Wade Stiltner - (304) 550-0589
 Rebecca Moretto - (304) 257-8919

West Virginia Department of Agriculture
 1900 Kanawha Boulevard, East
 Charleston, WV 25305
 (304) 558-2214



Annual Application for Apiary Registration
 As required by Code of West Virginia, Chapter 19, Article 13

Name:		County where beekeeper resides:	
Mailing Address:			
City:	State:	Zip Code:	

Telephone Contact Information

Home	Work	Cell
Email:		

If you are no longer keeping bees, check this box and we will remove you from our mailing list

Number of Colonies at time of Application: _____ Number of Apiaries: _____

Total Number of Colonies Lost During: Summer _____ Winter _____

What Caused Losses? (enter number of colonies in box): Mites _____ Queen Failure _____
 Starvation _____ Other _____

Number of increases (if any) in colonies: Splits _____ Packages _____
 Nuc's _____ Swarms _____

Request an Inspection for:	<input type="checkbox"/> Interstate Movement <i>(to another state)</i>	<input type="checkbox"/> Distribution of honeybees or queens <i>(within WV)</i>	<input type="checkbox"/> I am a new beekeeper
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At any time beekeepers needing assistance or have detected diseases or pest invasion, can call WVDA staff (names and numbers listed above) for inspection/assistance. The WVDA is committed to maintaining and promoting healthy colonies in West Virginia for honey production, the sale of bees and pollination.

Date _____ Signature _____

SWARM LIST (This section is voluntary)

If you wish to be included on a "Swarm List," enter the county(ies) you are interested in:

Your name, county and telephone number will be made available to the public for the purpose of removing swarms.

Honeybee Best Management Practices (This section is voluntary)

I have read the "West Virginia Honey Bee Best Management Practices" as written in §61-2-4, Limits on Liability, and will adhere to this Voluntary program. For additional information regarding this program visit the WVDA webpage, then Divisions/Plant Industries/Apiary and follow the applicable hyperlink.

Yes, I will participate _____
 Signature