



**AGRICULTURAL COMMISSIONER'S OFFICE AND
SEALER OF WEIGHTS & MEASURES**

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Phone: 209.525.4730 Fax: 209.525.4790

2019 APIARY REGISTRATION

To All Beekeepers Operating in Stanislaus County:

Please note some **UPDATED** Requirements for Registration of Apiaries in California

As of January 1, 2019, AB 2468 enacted new legislation for apiary registration as follows in summary:

- Beekeepers operating in California on the first day of January shall register the number of colonies in each apiary (FAC 29040).
- Beekeepers who move bees into the state, or otherwise come into possession of an apiary that is located within the state after the first of January, shall register **the name of the owner and the number and location** of colonies moved into the state or so acquired within 30 days after coming into possession of the apiary (FAC 29042).
- **It is unlawful for a person** to maintain any apiary that is not registered. Each registration is valid until January 1 of the following year (FAC 20945).
- Any person relocating a colony of bees from a registered apiary in one county to another county, where the apiary is not registered for the current calendar year, shall notify the destination commissioner **within 72 hours of the first movement** (FAC 29070).
- Any apiary operator or his or her designated representative relocating a colony of bees within a county where the apiary is currently registered **shall notify the commissioner of the movement** (FAC 29070.5).
- Each beekeeper shall pay an annual registration fee of \$10.00 to the Agricultural Commissioner of the county where the bees reside to cover the cost of apiary registration (FAC 29044).

In addition, effective January 1, 2020, AB 2468 enacted new legislation for apiary registration that will allow the County Agricultural Commissioner the authority to impose an administrative civil penalty (fine) for a violation of certain requirements regulating the registration and identification of apiaries and relocation of bee colonies.

Please identify your hives according to Food and Agriculture Code 29046

(a) No person shall maintain an apiary on premises other than that of his or her residence unless the apiary is identified as follows:

- (1) By a sign that is prominently displayed on the entrance side of the apiary or stenciled on the hive, that states in dark letters not less than one inch in height on a background of contrasting color, the name of the owner or person responsible for the apiary, his or her address and telephone number, or if he or she has no telephone, a statement to that effect.

California apiary laws pertaining to registration and hive identification can be found in the California Food & Agricultural Code, Sections 29040-29056.

Beekeepers with apiaries located in Stanislaus County shall complete the attached form for apiary registration. Provide the number of colonies at each location. Provide a map or describe the location using roads, canals, intersections, and landmarks, giving direction, distance, and side of the road so it can be placed on a county map. Provide Section, Township and Range. Provide GPS coordinates if known. **(Beekeepers requesting the option to receive notification prior to pesticide applications shall complete the corresponding portion of the form).** All apiary registration forms and pesticide notification requests shall be submitted to:

Stanislaus County Agricultural Commissioner
3800 Cornucopia Way Suite B
Modesto, CA 95358
Make checks payable to "Stanislaus County"

California Code of Regulations Pertaining to the Protection of Bees

CCR SECTION 6650 PESTICIDES TOXIC TO BEES

(a) Pesticides toxic to bees are those that include the words "toxic to bees" on the labeling of the pesticide, regardless of modifying words on the label that state "highly" or "moderately."

(b) Bees are considered to be inactive from one hour after sunset to two hours before sunrise or when the temperature is below 55 degrees Fahrenheit. The sunset and sunrise times will be those indicated in the local newspaper.

(c) Residual Toxicity (RT) time is that period of time after completing a pesticide application until there is minimal toxic effect to bees. The RT time is specified on product labeling and is based upon Residual Toxicity₂₅ (RT₂₅) studies. RT₂₅ studies determine 25 percent bee mortality based on the test bee population exposed to the formulated pesticide product applied to foliage.

CCR SECTION 6652 AVAILABILITY FOR NOTIFICATION

(a) Each beekeeper who desires advanced notice of applications of pesticides shall inform the commissioner of a two-hour period between 6 a.m. and 8 p.m. each day, during which time the beekeeper shall be available for contact, at the beekeeper's expense, to receive advance notice from persons intending to apply pesticide(s). This request for notification shall expire on December 31 each year.

CCR SECTION 6654 NOTIFICATION TO BEEKEEPERS

(a) Each person intending to apply any pesticide toxic to bees to a blossoming plant shall, prior to the application, inquire of the commissioner, or of a notification service designated by the commissioner, whether any beekeeper with apiaries within one mile of the application site has requested notice of such application.

(b) If the person performing pest control is advised of a request for notification, he or she shall notify the beekeeper, at least 48 hours in advance of the application, of the time and place the application is to be made, the crop and acreage to be treated, the method of application, the identity and dosage rate of the pesticide to be applied, and how the person performing pest control may be contacted by the beekeeper. This time may be increased or decreased by the commissioner, or by an agreement of both the beekeeper and the person performing the pest control work.



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2019 APIARY REGISTRATION

Please Print:

Date: _____

Apiary Name: _____ Owners Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____ - _____

Email: _____ Cell: (____) _____ - _____

DATE OF REMOVAL (if applicable): _____

If the date of removal must be extended, please contact the Stanislaus County Agricultural Commissioner. Otherwise, it will be assumed that hives have been removed as of the above date and notification (if requested) will cease.

Table with 5 columns: No. of Colonies, Section, Township, Range, and Provide a MAP (if possible) and WRITTEN DESCRIPTION (e.g. Address, Crossroads, and/or GPS points) for each apiary location.

Continues on back



No. of Colonies	REQUIRED			Provide a MAP (if possible) and WRITTEN DESCRIPTION (e.g. Address, Crossroads, and/or GPS points) for <u>each</u> apiary location
	Section	Township	Range	

PESTICIDE NOTIFICATION REQUEST

Please check one of the following:

I **DO NOT** wish to be notified of pesticide applications toxic to bees to a blossoming plant within one mile of the apiaries listed.

I request that I be notified, in advance, of the intent to apply any pesticides toxic to bees to a blossoming plant within one mile of the apiaries listed. This request is being made pursuant to California Code regulations, Section 6652 (a). The notification shall comply with California Code of Regulations, Section 6654 (a) & (b).

*Please notify the Stanislaus County Agricultural Commissioner, in **writing**, if hives are relocated within the county.*

I, _____, am available for notification during the time period from _____ AM / PM to _____ AM / PM each day, (must be at least a two-hour time period between 6 AM and 8 PM), at the following phone number(s):

(_____) _____ - _____ (_____) _____ - _____

SIGNATURE

DATE



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2019 APIARY MOVEMENT NOTICE

Please Print:

Apiary Name: _____ Owners Name: _____
Mailing address: _____
City: _____ State: _____ Zip: _____ Phone: (____) ____-_____

MOVING FROM (OLD LOCATION) County: _____

No. of colonies moving	No. of colonies remaining	REQUIRED			WRITTEN DESCRIPTION (e.g. Address, Crossroads, and/or GPS points) for <u>each</u> apiary location
		Section	Township	Range	

MOVING TO (NEW LOCATION) County: _____

Date of Movement	No. of colonies arriving	REQUIRED			Provide a MAP (if possible) and WRITTEN DESCRIPTION (e.g. Address, Crossroads, and/or GPS points) for <u>each</u> apiary location
		Section	Township	Range	

SIGNATURE

DATE