2020 ANNUAL GLENN COUNTY APIARY REGISTRATION

Only submit this page if you are NOT entering this yourself into Bee Where

Name:		Phone:	Cell:	
DBA:			Fax:	
Street Address:				
City:		State:	Zip:	
Mailing Address:			Email:	
City		State:	Zip:	
Home County:				
Please fill out	colony count and locati	on information	n below. Include a map for each location.	
	Location			
Colonies Information Such as Crossroads, Landmarks, Canals, Ranch Na			andmarks, Canais, Ranch Names, etc.	
(Additional Space	on Back if Needed)			
Beekeeper Signature:			Date:	
Please check if app	licable:			
□ HOBBYIST:	Nine hives or less shall register but no payment is required.			
□ BEE SWARM LIS	•	If you wish to be added to the Glenn County Bee Swarm List. We will refer your name and contact information to people requesting swarm removal.		
□ RETIRED/MOVE		Sale and Certifi	county. If bees were sold, please complete cate of Destruction and return a copy to our syment to CDFA.	

	Location		
Number of Colonies	Address, Legal Description, Section, Township, Range, GPS Coordinates, Location Information Such as Crossroads, Landmarks, Canals, Ranch Names, etc.		