

Application for APIARY Registration

Beekeepe	er Intormation:					
Previously	y registered?	Yes: No: If so	Previous Beekeep	er ID:Don't Know:	<u> </u>	
Name: _						
Address:						
City:	y: State: Zip Code:					
County:_			Tov	wnship:		
Primary Telephone:A		ernate Telephone	e:Email:	Email:		
	NUMBER					
APIARY	OF COLONIES	COUNTY	TOWNSHIP	ADDRESS (STREET, TOWN)	PROPERTY OWNER	
Checka	applicable:					
I molonger have bees in Pennsylvania.						
Iha	ave previousl	y submitted a regis	tration form. (Reg	gistration number issued:		
If you wish to register or renew or make changes on your account online, please go to this link: https://www.paplants.state.pa.us/Maint/SecurityNewUser.aspx						
Signatur	·e:		Date:			

Bureau of Plant Industry
Apiary Section
2301 North Cameron Street
Harrisburg, PA 17110
Phone 717-346-9567 FAX 717-783-3275

Please complete and return with registration fee of \$10.00 payable to the Commonwealth of Pennsylvania.