Texas Apiary Inspection Service

Beekeeper Registration Application

Section 131.045

| Name: | | |
|---|------------------|--|
| Business Name: | | |
| Mailing Address: | | |
| City: | Primary phone #: | |
| State: County: | Alterna | te phone #: |
| Zip code: | E-mail Address: | |
| There is a \$35 fee for registration. | Please re | eturn the completed form by mail, fax or email. |
| | 2475 Station | spection Service TAMU , TX 77843-2475 |
| COUNTY | | Apiary address, coordinates, or map provided |
| 333 | | 7.plary address, seeramates, or map provided |
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| Bee removal (requires a Bee Re | n product | Pollination, local Pollination, migratory tion Honey production Ag valuation tatement in addition to this form.) year (September 1 – August 31) in which it is filed. |
| Signature: | | |
| This application may be signed electronically and emailed or faxed to TAI | IS, however the | registration is not effective until payment is received by mail or electronic submission |

