



ALAMEDA COUNTY COMMUNITY DEVELOPMENT AGENCY
 AGRICULTURE / WEIGHTS & MEASURES DEPARTMENT

Sandra Rivera
 Agency Director

Cathy Roache
 Deputy Director
 Agricultural Commissioner/
 Sealer of Weights
 and Measures

224 West Winton Ave
 Room 184

Hayward, California
 94544-1215

phone
 510.670.5232
 fax
 510.783.3928

www.acgov.org/cda

As required by California Food & Agriculture Code (FAC) section 29040, every person who owns an apiary within the state of California is required to register the number of colonies in the apiary and the location(s) of the apiary(s).

No fee will be collected when you register your apiaries in **2024**, but in accordance with state law your current apiary location information must be provided to our office each year by January 1st.

Please complete, sign and date this registration form and mail or deliver it to the address shown above. Please do not send any money with this form. Questions may be directed to the duty biologist at: (510) 670-5232.

NAME	EMAIL	PHONE
ADDRESS	CITY	BEEWHERE REG #
	ZIP CODE	BRAND NO.

() Check here if you no longer have bees in Alameda County

Number of Colonies	Please describe the location using addresses, roads, intersections, direction, which side of road	Section, Range, & Township

Applications of restricted pesticides which are toxic to bees are rare in Alameda County. If a request for restricted pesticide notification is necessary, then complete the section below by providing a time (minimum two hours) and phone number where you can be reached. I hereby request to be notified before pesticide applications as provided for in FAC section 29101 and Title 3 of the California Code of Regulations Section 6654.

I am available for notification during the two-hour time period from _____ to _____ Monday through Friday by collect call to the following phone number(s): _____ or _____.

I understand that if I fail to submit my request for pesticide notification to the Agricultural Commissioner IN WRITING within the 72-hour period before relocating, I may not be entitled to recover damages for any injury from pest control operations. Also, I will not recover damages if I fail to properly post an identification sign at my apiaries or if I am not available for notification at the hours I have designated above. I understand that this "Request for Notification" will expire on December 31 of the current year.

Apiary Owner Signature _____ Date _____

Agricultural Commissioner Representative _____ Date _____

