Online Course: First-time registrants must complete UCCE online beekeeping course.

Registration: Are each of your bee locations registered with AWM for this calendar year?

Water Supply: Is there an adequate water source provided for your hives at each location?

Fire Prevention: Are you practicing weed suppression, have a shovel, operable water hose or fire extinguisher available at all times to suppress accidental fires?

Bee Smokers: Do you use a fire resistant smoker plug to prevent embers from escaping smoker? Do you have a noncombustible container with secure lid to put smoker?

Re-Queen: Have you requeued your hives with known European honey bee (EHB) mated queens (preferably marked) whenever you:
- establish hives from wild swarms and colonies OR
- observe your bees displaying over defensive behavior OR
- when your queen becomes less productive or weak such as every two years

Regular Hive Check by Beekeeper: Are you opening your hives at least once monthly to check for:
- over-defensiveness, presence of a productive EHB queen, apiary pests/diseases, sufficient food stores and swarm prevention? Are you taking corrective action in a timely manner?

Identification Information on Hive: Do you have your name and phone number displayed on your hives for contact by Apiary Inspector, Pesticide Applicator or First Responder?

Location: If you have 21 hives or more per property location, are they kept on the interior of the property that is 100-feet-or-more from road and 300-feet-or-more from neighboring dwellings?

Sensitive Sites: If you have 21 hives or more per property location, are they kept 450-feet-or-more from property line of sensitive sites (ex. schools, playgrounds, picnic areas, outdoor sports facilities, daycare centers, kennels, horse boarding facilities, senior care facilities, medical treatment facilities and hospitals)?

As a beekeeper, I am aware that at any time a sensitive site* could be designated in my area. I will be notified in writing and be required to move my hive(s) to the required setback distance. I am aware that San Diego County Ordinances are meant to complement and enforce existing state laws on apiaries as defined under California Food and Agricultural Code and California Code of Regulations (https://www.cdfa.ca.gov/plant/pollinators/docs/Laws-Bee-Management.pdf). I have reviewed and understand the current San Diego County Ordinance on Bees and Apiaries (http://www.sandiegocounty.gov/awm/bees.html). I hereby certify the foregoing to be true and correct.

Company Name (if applicable)_____________________________________

Beekeeper’s Printed Name & Signature_________________________________ Date_____________

Name & Signature of AWM Rep.____________________________________ Date Received ______________

*For more details on sensitive site designations in your area, please contact AWM.