

Registration Application

Section 131.045

Name:	Business Name:
Address:	
City:	Primary phone #:
State:	Alternate phone #:
Zip Code:	E-mail Address:

There is no fee for registration. Please return the completed form by mail, fax or email.

**Texas Apiary Inspection
Service 2475 TAMU
College Station, TX 77843-2475**

County(ies) where Apiary(ies) are located:

COUNTY	Apiary address, coordinates, or map provided

The beekeeper affirms that his/her hives and equipment are in compliance with Chapter 131 of the Texas Agriculture Code.

Signature: _____



Office of the Chief Apiary Inspector
2475 TAMU
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College Station, TX 77843-2475
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E-mail: tais@tamu.edu
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