



INTRASTATE APPLICATION



APIARY INSPECTION SERVICE
DEPARTMENT OF ENTOMOLOGY
TEXAS A&M UNIVERSITY
COLLEGE STATION, TEXAS 77843-2475

=====

NAME _____ DATE _____

ADDRESS _____ DATE OF INSPECTION _____

_____ PHONE# _____

E-mail Address _____

=====

To obtain your permit, please send \$35.00. If you have not been inspected, a notarized affidavit is required. Please fill out the section below and have it notarized.

I, _____, do hereby swear that to the best of my knowledge my bees are free of any contagious and infectious diseases of honeybees.

Signature _____

NOTARY PUBLIC _____ My commission expires _____

SEAL
=====

TOTAL NUMBER OF COLONIES TO BE MOVED _____

TOTAL NUMBER OF EQUIPMENT TO BE MOVED _____

LIST COUNTIES

| COUNTY | GENERAL LOCATION | # OF COLONIES | MISC. |
|--------|------------------|---------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

If you need more space, please use the back of this application. Any questions can be directed to this office, (979) 845-9713.