

Rofhiwa Nethanani: Mavis Matsho: **Enquiries**: 012 309 8739 012 309 8763

Beekeeper Registration Form

The information on this form is collected under the authority of the **Agricultural Pests Act**, **1983 (Act No. 36 of 1983)** and **Control Measures R1511 of 22 November 2019** relating to Honeybees. Any person who keeps, owns, or is in charge of a colony of honey-bees, whether for commercial, hobbyist or as a bee removal service provider is **legally** required to register **Every 24 months** with the Department of Agriculture, Land Reform and Rural Development (DALRRD) as a Beekeeper. **There is no cost involved**.

NE	3: All fields mar	ked with * are	comp	ulsory							
A.	A.Purpose: * Initial Regist		ration		Ren	enewal Registration			Notice of Change		
	Information folion Information folions			cation:		Tra	ding / Business F	Regis	tration nu	ımber (<i>if app</i> ı	icable):
	al Address (PO E	Box or Street):									
Post	al Code: *	-									
Physical Address of business											
operating premises: *											
C. I	nformation of	Business Con	tact P	erson:							
Surn	Surname: *				Initials: *				Title: *		
Email Address: *				Cellphone N			one No.: *		Landline No.:		
D. I	nformation of	Beekeeping (Operat	tion:				1			
Prov	Province: *			Beekeeping Centre (Town Name): *				No. of Colonies (±):			
Regi	istration No. if Pro	ered:	Other Registration No(s). In use by you:				Number of Apiary Sites (±):				
	Beekeeping Activities *	Honey Production		Pollir		ation	Bee Remov	als		Others (Specify):	
	Гуре of Business [*]	Commercial		Smal Scale			Hobbyis	st		Other (Specify):	
3 . 1	Гуреs of Bees *	Capensis (Cape honey bee)					Scute	ellata (African honey bee)			
	If you have sole plicable comme		e purcl	nased sor	meone	e else's	, please provide	e ful	details:	/ any other	
 I. S	Signed at *					this	day of			20	
	Signatur: *										
J.	For Office use	ONLY									
	Captured by: _		Date:			Signatur:					
	Certificate: Re	gistration Nun	nber: _			Date	Posted:				