

**MONTANA DEPARTMENT OF AGRICULTURE  
AGRICULTURAL SCIENCES DIVISION  
APPLICATION FOR REGISTRATION OF ALFALFA LEAFCUTTING BEES AND/OR  
BEE CERTIFICATION**

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Business Name: \_\_\_\_\_

Business Location : \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**ALFALFA LEAFCUTTING BEE REGISTRATION**

No person may possess or control Alfalfa Leafcutting Bees in this state unless the bees are registered. This is a one-time fee, with continuous registration until you notify the committee of cancellation. See second page for more information.

\_\_\_\_\_ \$15 NEW Alfalfa Leafcutting Bee Registration (one-time fee).

General location of bees to be Registered: \_\_\_\_\_

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**ALFALFA LEAFCUTTING BEE CERTIFICATION & SAMPLING SERVICE**

Persons possessing or controlling Alfalfa Leafcutting Bees in the State of Montana may annually certify all or part of their bees.

\_\_\_\_\_ Basic Analysis for Certification and Service Samples at \$50.00

\_\_\_\_\_ Sex Ratio/Percent Emergence at \$20.00 per sample

\_\_\_\_\_ Total Number of Samples Submitted

IF SAMPLES ARE  
TO BE CERTIFIED:

General location of bees: \_\_\_\_\_  
Pounds of bees to be sampled: \_\_\_\_\_

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\$ \_\_\_\_\_ TOTAL FEE ENCLOSED

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CONTACT PERSON: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR OFFICE USE ONLY

DATE: \_\_\_\_\_  
CK #: \_\_\_\_\_

AMOUNT: \_\_\_\_\_  
CR #: \_\_\_\_\_

\_\_\_\_\_ ALCB REGISTRATION  
\_\_\_\_\_ ALCB SAMPLE

## **DIRECTIONS FOR REGISTRATION OF BEES**

- Fill out the application form. Make any changes to address information on the application form if needed.
- If this is a first-time registration, submit a \$15.00 initial registration fee. Make check or money order payable to the Montana Department of Agriculture.
- Send application & fee to:

ATTN: State Entomologist  
Montana Department of Agriculture  
Agricultural Sciences Division  
302 N Roberts St  
Helena, MT 59601

## **DIRECTIONS FOR SAMPLING OF BEES**

- Fill out the application form.
- The fee is \$50.00 for Basic Analysis, which includes chalkbrood, parasites, predator, and live larvae count. This includes Service and Certification samples.
- The fee is \$20.00 per sample for Optional Analysis for sex ratio and percent emergence.
- Sample of total population of bees to be analyzed as a service, must be sent to the Montana Department of Agriculture for analysis.
- Samples for Certified Analysis must be collected by a Department of Agriculture employee.

## **INSPECTION COSTS FOR CERTIFIED SAMPLING**

Mileage – 37.5 cents/mile to and from nearest inspector's office.

Meals – \$5.00 morning

\$6.00 midday

\$12.00 evening

Lodging – Subject to Federal lodging rates by county

Hourly Rate – \$10.00/hour (including travel time)

- Any questions concerning registration or certification of Alfalfa Leafcutting Bees can be answered by phoning (406)444-3790 or by FAX (406)444-9493.
- Please notify the Department in writing if you no longer have Alfalfa Leafcutting Bees.