

Date \_\_\_\_\_

**STATE OF MONTANA  
DEPARTMENT OF AGRICULTURE  
302 N Roberts P.O. Box 200201  
Helena, MT 59620-0201  
406-444-3790**

FOR OFFICE USE ONLY

Approved By:  
Date:

# Application for Registration of Pollination Site

YOUR NAME			TELEPHONE NUMBER (BUSINESS)
BUSINESS NAME			TELEPHONE NUMBER (MOBILE/CELL)
ADDRESS			FAX NUMBER
CITY	STATE	ZIP CODE	EMAIL ADDRESS

Registration directions are on page three of this form. **Registration fee is \$19.00 per site location.** Pollination sites are registered to the agricultural producer, not the beekeeper. Therefore, there is no beekeeper registration fee. **YOU MUST** verify the availability of the location by phone or email before submitting payment.

[illegible]

## REGISTRATION DIRECTIONS

<b>Date</b> _____  <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">1</div>		<b>STATE OF MONTANA</b> <b>DEPARTMENT OF AGRICULTURE</b> 302 N Roberts P.O. Box 200201 Helena, MT 59620-0201 406-444-3790 <small>Application for Registration of New Pollination Sites</small>				<b>FOR OFFICE USE ONLY</b>  Approved By: _____ Date: _____  <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">6</div>	
YOUR NAME				TELEPHONE NUMBER (BUSINESS)			
BUSINESS NAME				TELEPHONE NUMBER (MOBILE/CELL)			
ADDRESS				FAX NUMBER			
CITY	STATE	ZIP CODE	EMAIL ADDRESS				
Registration directions are on the back of the pink form, or can be accessed at the bottom of this web page. If using internet access, please print two copies, and retain one for your records. Registration fee is <b>\$19.00</b> per location							
Crop and Hectares of <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">4</div> Site	(County, <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">2</div>	Location Latitude, and Decimal Longitude are REQUIRED)		Beekeeper's Name (Please Print)	Beekeeper's Approval Signature	Number of Hives	
	County	Latitude (Decimal)	Longitude (Decimal)	<div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">3</div>		<div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; margin: 0 auto;">5</div>	

### NEW POLLINATION SITE REGISTRATION

PLEASE COMPLETE:

1. The date, your name, business name, mailing address, city, state, zip code, phone numbers (business, mobile, and fax), and your email address.
2. YOU MUST report site location as the latitude and longitude of your site (GPS coordinates) to AT LEAST four decimal places. Please also include a rough sketch of the site location on page 2 of this document or include a Google map satellite image of the location. In accordance with MCA 80-6-112a(i), the applicant must own, lease, or rent the land upon which the pollination apiary site is to be located.
3. The name of the beekeeper must be legible. Please print or type this information neatly. The beekeeper's approval signature is required for all site registrations. In accordance with MCA 80-6-112a(ii), the applicant may not own the bees or the hives that are to be placed upon the apiary site.
4. Record the crop and the total number of hectares in which the bees are pollinating here. A pollination site is only valid for time specified by the department, and all pollination apiaries must be removed within 2 weeks after the full bloom period of the crop to be pollinated.
5. Record the total number of hives to be located at the indicated site. The total number of hives should not exceed the adequate number required for pollination of that crop in the specified number of hectares.
6. . DO NOT send in any form of payment until this form has been approved by the Montana Department of Agriculture. Once your sites have been approved by the department you will be notified and able to send in your payment.

**Contact the apiary program by phone or email if you have any questions:**

[apiary@mt.gov](mailto:apiary@mt.gov)  
 (406) 444-3790