Pollinator Protection Worksheet - Apiary Inspector

Beekeeper:_____

Case Number:_____

Apiary Inspector:_____

Inspection Date:_____Incident Date:_____

Apiary Information		
Number of Hives in Apiary:	Number of Hives Affected:	Number of Hives Inspected:
Magnitude of loss per colony (%):		
Apiary Details (colony history, management details, etc.):		
Describe any Hive Disease, Pest, or Malady contributing to loss:		
Describe the food stores of the affected hives:		
Additional apiary/hive observations:		
Were any samples taken for lab analysis? If yes, attach lab results:		
Additional Info:		