

Apiary Registration Application

Registration not required for 1-4 colonies

Check one:	NEW LICENSE	RENEWAL-License number:
For internal use License numbe	r:	Application number:
Business name:		Phone number:
Licensee name:		Email:
Business addre	ss:	
Mailing address	::	
If manager of b	eehives is different fr	om licensee (above), please provide contact information.
Beehive manag	er:	Phone number:
Email:		
License fe	ee	
Number of o	colonies	X \$0.50 + \$10.00 =
If renewing a	after July 1, fee amoun	t is \$0.50 per colony plus \$20.
PAYMENT METHOD		
FOR CHECK OR	MONEY ORDER, MAIL	TO: FOR CREDIT CARD CHARGE, MAIL OR FAX TO:
Oregon Departn	nent of Agriculture	Oregon Department of Agriculture
P.O. Box 4395,		635 Capitol Street NE
Portland, Orego	n 97208-4395	Salem, Oregon 97301-2532
		Secure Fax: 503.986.4746
•	yable to Oregon Depart trative fee per ORS 30.	ment of Agriculture. All dishonored checks or electronic payments will incur a 701.
For Visa, Maste	rCard, Discover, or Am	erican Express card charges, complete the following information:
Name of cardho	lder:	Phone:
Address of card	holder:	
Email or fax receipt available for credit card payments ONLY. Email or fax:		
Signature:		Total charge:
Card Number: _		Expiration date: