



Please fill out the form and return it to:

Primary Agriculture Branch — Provincial Apiarist
204-545 University Crescent, Winnipeg, Manitoba R3T 5S6
Fax : 204 945-4327
Email : Derek.Micholson@gov.mb.ca

Application for Inter-Provincial Movement of Beekeeping Equipment and Bees (Honey Bees)

Beekeeper(s) Name: _____

Company Name: _____

Address: _____

City/Town: _____ **Prov.** _____ **Postal Code:** _____

Phone: Bus: _____ **Res.** _____

Fax: _____ **Cellular:** _____

E-mail: _____

Province of origin for the beekeeping equipment and/or honey bees: _____

Final destination in Manitoba (nearest town or municipality): _____

Total number of colonies or honey bee boxes without bees: _____

Signature: _____ **Date:** _____

FOR OFFICE USE

Permit ID #: _____

Registration Number (if applicable): _____