## Official National Apicultural Registry Form – For Individual Use<sup>1</sup>

REFE	RENCE NO.													
Date and place				New registry							Update			
BEEK	EEPER, FARMER OR H	ONE	Y COLLEC	TOR DETAIL	S							1		
Name										Gender I		F		M
Address					Official Id. No						ld. No.			
Telephone No.				E-mail address										
Selec	t the main activity		Bee	keeping	H				Hone	Honey collection				
Select the main product			ney	Wax		Propolis		Roy	Royal Jelly		Bees		Other	
Estimated production (kg)														
APIA	RY INFORMATION													
No. of apiaries			Total No.	of colonies	Main settlemer				emen	nt location				
No. of traditional hives			No. of of frames	colonies in	movable Type of mova			ovable	able frame hives					
SPEC	IFIC LOCATION OF TH	E API	ARIES (R	egion, Zone,	, W	oreda,	Kebele	<del>2</del> )						
No.	Name of apiary	Loca	ation (R,Z,	,W,K)	Coordinates			No	No. of colonies			No. of colonies in T.H. <sup>2</sup>		
No.	Name of apiary	Loca	ation (R,Z,	(R,Z,W,K)		Coordinates			No	No. of colonies			No. of colonies in T.H.	
No.	Name of apiary	Loca	ation (R,Z,	.W,K)	Coordinates				No. of colonies			No. of colonies in T.H.		
No.	No. Name of apiary Locati			ation (R,Z,W,K)			Coordinates			No. of colonies			No. of colonies in T.H.	

<sup>&</sup>lt;sup>1</sup> Every individual beekeeper, honey collector, processor and exporter must be registered. The authorities responsible for the official registry are the Ministry of Agriculture and the Ethiopian Agricultural Authority. The data contained in the registry must be safely kept by the competent authorities. Companies and cooperatives can help get the beekeepers registered.

<sup>&</sup>lt;sup>2</sup> T.H. = transitional hives.

REFERENCE NO.										
GENERAL MANAGEMENT INFORMATION										
Independent Beekeeper	Works with Coop	erative	Work	orks with private company						
The beekeeper owns the equipment	t for harvesting and	d extracting honey	,	Yes	No					
The beekeeper owns the containers for raw honey										
The cooperative or company owns t										
The beekeeper owns the transport to move honey and other bee products										
The beekeeper keeps records from honey harvest and sale										
The beekeeper has received training on Good Beekeeping Practices (GBP) from companies or public institutions										
The beekeeper(cooperative(company uses pesticides to control pests and										
diseases										
REMARKS										
ATTESTATION										
THE INFORMATION PROVIDED IS TRUE AND I AGREE TO BE INSPECTED BY THE COMPETENT AUTHORITIES TO										
VERIFY THE IMPLEMENTATION OF GOOD BEEKEEPING PRACTICES.										
I UNDERSTAND THAT THE REGISTRATION AND COMPLIANCE WITH GBP IS MANDATORY FOR THE SELECTED										
EXPORT VALUE CHAINS.										
I UNDERSTAND THAT IT IS MANDATORY TO INSERT THE OFFICIAL REGISTRATION NUMBER ON EVERY HONEY										
BATCH HARVESTED AND SOLD.										
I UNDERSTAND THAT IT IS MANDATORY TO UPDATE THE INFORMATION RELATED TO MY BEEKEEPING ACTIVITY										
EVERY TWO YEARS.										
Beekeeper/collector name		Signature								
FOR OFFICIAL USE ONLY										
Submission date	Approval date		Propo	posed date for GBP inspection						
Name of Officer	Signature		Official stamp							