

Apiary Inspection Record



Date / Time: _____

Location: _____

Conditions: _____

Rego / Hive ID: _____

Purpose: _____

Hive Configuration: _____

Entrance Activity: *Initial Observations*

High Average None

Hive Weight: *Heavy* *Medium* *Light*

Heavy Medium Light

Population: *Bursting* *Normal* *Low*

Bursting Normal Low

Temperament: *Calm* *Cranky* *Bananas*

Calm Cranky Bananas

At least twice per year, at a minimum of 4 consecutive calendar months apart, you must:

- Inspect every hive in all your apiary sites and assess for general strength and presence of pests or diseases (Code of Practice Section 3.1);
- Inspect at least one hive per apiary for exotic arthropod pests, particularly Varroa and Tropilaelaps mites, using one of the tests below (Code of Practice Section 3.2).

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(Bendigo)
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Irregularities

Wax Moth Mould Odd Odour

Chewed Pupae Perforated Brood Caps

Dysentery Starvation Poisoning

Laying Workers Robbing Chilled Brood

Wasps Ants Mice

Sacbrood BQCV

Action Taken: _____

Stores

Capped Honey: Yes No No. of frames (approx.) _____

Uncapped Nectar: _____

Pollen: _____

Worker / Drone Brood

Brood Pattern: *Solid* *Normal* *Spotty* No. of frames (approx.) _____

Eggs: Yes No _____

Larvae: _____

Worker Brood: _____

Drone Brood: _____

Queen

Queen Bee: Yes No ⇒ Marked? Yes No

No. of Active Queen Cells: _____ Capped _____ Uncapped

Swarm
 Supersedure
 Emergency

Action Taken: _____

Colony Health

Notifiable Pests / Diseases

AFB EFB Nosema

Braula Fly SHB Chalkbrood

Exotic Mite Inspection

Tests Performed: *Sugar Shake* *Alcohol Wash* *Drone Uncapping*

Suspected Pest: _____

Action Taken: _____

If you detect mites or arthropod pests, call the Emergency Plant Pest Hotline – 1800 084 881 IMMEDIATELY

Other Comments / Actions / Observations

