

## Tennessee Department of Agriculture Regulatory Services, Apiary Section Apiary Complaint Form

For Official Use Only						
Complaint No.						
Received						
Reconciled						

Complete all fields on this form, submit the form via e-mail and you will be contacted reguarding the complaint.

Complaintant:					
Last Name	First Name			M.I.	
Street Address					
City		State		Zipcode	
Home Phone Wor	k Phone			Cell Phone	
E-mail		Best Method of Con	itact		
Home County	Apiary	Registration Number	( If Knov	vn )	
Number of Apiaries Number of Colonies	s	Month	Day		Year
Owner of Colonies:					
Last Name	First Nam	e		M.I.	
Street Address					
City		State		Zipcode	
Home Phone Wor	k Phone			Cell Phone	
E-mail		Best Method of Con	itact		
Home County Apiary Registration Number ( If Known )					
Number of Apiaries Number of Colonies	s				
Reason for Complaint (Check all Boxes that ap	ply)				
Location of Colonies Suspecte	ed Problei	n with Colonies		Bees in You	ır Wall or House
Swarming Honey Bees Hon	ney Bees i	n Pool	Afric	canized Hone	y Bees
Unregistered Apiary Someone Sellin	ng Uninsp	ected Bees/Colonies		Possible Disea	ased Colony
Honey Bee Colony in Tree Other					
Additional Details					