



Operation Name: \_\_\_\_\_ Date: \_\_\_\_\_

**A. Origin of Bees**

- 1) Do you manage both organic and non-organic hives or colonies?  
☐ No, only organic hives and colonies ☐ Yes  
a) If yes, attach a description of the management practices used to prevent commingling and contamination resulting from bee drifting and robbing. ☐ Description attached
- 2) How do you source replacement bees?  
☐ On-farm nucleus colony or nuc ☐ Off-farm nucleus colony or nuc ☐ Other source (describe):

- a) If using non-organic bees, describe how you will document the following:
1. Replacement bees do not exceed 25% of the colonies present in the previous honey flow (going into winter)
  2. Bees are managed organically for at least 60 days prior to product collection:
  3. Harvest equipment is removed during this 60-day period:

- 3) Do you have plans to expand your apiculture operation?  
☐ No ☐ Yes  
a) If yes, what are your plans (check all that apply):  
☐ Purchase organic hives and bees ☐ Split an existing colony  
☐ Purchase non-organic bees and complete a separate one-year transition

**B. Forage Zone and Surveillance Zone**

*The Organic System Plan must demonstrate that sufficient organic forage is available within the forage zone throughout the year. Given that even in well-managed operations with sufficient forage in the forage zone a small number of bees will travel out of the forage zone to forage, the OSP must also demonstrate the crops in surveillance zone offer minimal risk to organic integrity.*

- 1) Attach a map of your apiary that identifies the following:
- Location of the hives
  - The forage zone. Within the forage zone:
    - identify organically managed versus wild land and water sources.
    - Note any topography and climatic conditions that would impact the bees' foraging.
    - Describe any sources of potential contamination located within the 1.8-mile (3km) forage zone.
- ☐ Map attached
- 2) Describe the period in which sources of pollen or nectar are expected to be present. Provide a description or chart of bloom periods and plant densities. ☐ Chart attached
- 3) **Surveillance Zone:** Describe crops grown and high-risk activities such as sanitary landfills, incinerators, sewage treatment facilities, power plants, golf courses, towns or cities, land to which prohibited materials are applied, and all other sources of potential contamination located in the surveillance zone of 2.2 miles (3.4 km) beyond the forage zone. Crops produced using excluded methods, deemed by the accredited certifying agent to be attractive to bees, are not permitted on land within the surveillance zone.

**C. Hive Care**

- 1) Provide a description of the structures provided for your bee colonies, including foundation and frame types and how your operation maintains these structures:

*Hives must be constructed of non-synthetic materials. Lead-based paints are not allowed for the painting of outside surfaces. Treated wood is prohibited.*





- 2) Verify that the supplemental feeding program outlined in [L3.0 Livestock Fee, Feed Supplements, Water](#) includes approximate times throughout the year and identifies summer vs winter alterations. ☐ Verified
- a) If organic sugar syrup is provided to the bees, describe how your operation verifies that it is not provided within 15 days of the placement of bee product collection equipment:

- 3) Describe anticipated health and/or pest problems and your preventative management plans for them: i.e. varroa mite, tracheal mite, small hive beetle, bears, small mammals, etc.

Health or Pest Issue	Prevention Plan	Additional Notes

Materials used in harvest and hive maintenance activities, including your source of smoker fuel, must be listed on your Materials Application Form. **Note: The producer must not use synthetic bee repellants.**

#### D. Harvesting and Extracting

- 1) Describe your method and schedule for harvesting your bee product(s):

Product	Harvesting Schedule	Method

- 2) Attach a description of how your product is extracted and the types of equipment used. Please provide a flow chart of activities from the removal of product from the hive to packaged product. ☐ Description and Flow Chart Attached
- a) Are any ingredients added to the final product(s)?
- ☐ No ingredients added ☐ Yes: Complete relevant Handler OSP Forms, listed on the [Guide to Handler OSP Forms](#).
- 3) In addition to the records listed on [L9.0 Record Keeping](#) and [G8.0 Record Keeping](#) (if applicable), check any of the applicable records listed below that you maintain:
- ☐ Floral and pollen sources in the forage and surveillance zones
- ☐ Documentation for sources of foundation and its organic status
- ☐ Documentation that comb has been drawn out under organic management
- ☐ The season(s) 'clean' frames have been used in production
- ☐ Documentation for introduced or raised queens
- ☐ Documentation of hive maintenance throughout the season; expansion into additional supers, harvest dates, monitoring of brood health, etc.

