| OAP 1: Apiculture Overview | | | | |
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| 1. **GENERAL DESCRIPTION** 2. What type(s) of bees are used for organic apiculture production?  *Apis mellifera*   Other, describe: 3. How are the bees suited to the local ecotype?   Native to the region  Naturalized/adapted to region  Other, describe: 4. List the apiculture product(s) requested for certification (check all that apply):  Honey  Beeswax  Pollen  Royal Jelly  Propolis  Bee Venom  Other , describe: 5. Describe the capacity of hives managed by your operation:    1. Total number of organically managed hives:    2. Total capacity of all organically managed hives: 6. Provide a flow chart or narrative description of your organic apiculture system, from the first day of organic management to shipment of apiculture products.  **Attached** 7. Describe your hive identification system: | | | | |
| 1. **HIVE LOCATIONS, FORAGE ZONE & SURROUNDINGS**   *Organic apiculture production must occur on land that is certified organic. Land that is managed by you must be described in the Organic Grower Plan (OGP) or Organic Wild Crop Plan (OWCP) as applicable. Organic certificates must be provided for land that is operated and certified under the management of another operation.*   1. Describe the location, type and number of hives requested for organic certification in the table below. | | | | |
| **Apiculture production unit (Farm/parcel name)** | **Physical location (address and GPS)** | **\*Certified operation managing land** | **Hive type** | **Number of hives** |
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| 1. Do hives remain in a single location (permanent), or are they moved between locations?  Permanent  Moved   If moved, please describe. | | | | |
| 1. Are hives ever placed on land that is not managed by your operation?  Yes  No  If yes, provide a current organic certificate for each certified operation where hives are placed, and list them in the table above.   **Attached** | | | | |
| 1. Briefly describe all land uses within the **forage zone** (agricultural, wild crop/natural vegetation, residential, etc.), consisting of a radius of 1.8 miles/3 km of the apiary site: | | | | |
| 1. Attach a map of the entire forage zone and surrounding area (2.2 miles/3.5 km beyond forage zone) that shows the location of hives, organic certified land, location of wild land/native vegetation, water sources, and all other land uses.  **Attached** 2. Is any land within the forage zone managed organically by an operation other than those listed above where hives are placed?  Yes  No  If yes, identify certified operations on the map and attach the organic certificate(s).  **Attached** 3. Is all land within the forage zone (1.8 mile/3 km radius of the hive(s)) certified organic?  Yes  No If no, how do you ensure that bees do not have contact with prohibited substances that could contaminate apiculture products or negatively impact bee health? | | | | |
| 1. If applicable, attach affidavits from landowners within the forage zone stating that no prohibited materials are used.   **Attached** 2. Do any land uses within 2.2 miles beyond the forage zone present high risk for use of prohibited substances (golf courses, industrial uses, etc.)?  Yes  No  If yes, please describe 3. What measures are in place to prevent contact of organic bees with prohibited materials while foraging? | | | | |
| 1. **SPLIT OPERATION** 2. Does your operation engage in conventional apiculture production?  Yes  No If yes, where are conventional hives located? (Check all that apply)   Same parcels as organic hives  Different parcels than organic hives 3. Describe measures to prevent commingling of organic and non-organic bees: | | | | |
| 1. Describe monitoring to ensure these measures to prevent commingling are effective, and the frequency of monitoring. | | | | |
| 1. **ORGANIC INTEGRITY & MONITORING** 2. How do you monitor bees and hives for contamination or contact with prohibited substances? 3. How often do you monitor?  weekly  monthly  annually  as needed  other (specify): | | | | |