

Beekeeper Biosecurity Compliance Sheet

Beekeeper Details

Name

Registration Number

Contact Information

Apiary Location(s)

Biosecurity Practices

Practice	Compliant	Notes
Hive Equipment Cleaned & Maintained	<input type="checkbox"/>	<input type="text"/>
No Movement of Disease Affected Material	<input type="checkbox"/>	<input type="text"/>
Record Keeping of Inspections	<input type="checkbox"/>	<input type="text"/>
Quarantine for New Hives	<input type="checkbox"/>	<input type="text"/>
Protective Clothing Used	<input type="checkbox"/>	<input type="text"/>

Disease Monitoring

Diseases Monitored

Actions Taken if Disease Detected

Date(s) of Last Inspection

Sign Off

Beekeeper Signature

Date