

Inspection Certificate SAMPLE:



APIP-001
Revised August 08, 2022

**Inspection Certificate
Apiary Pre-Shipment Inspection Program**

The bee colonies and associated equipment in this shipment are being shipped in accordance with the Apiary Pre-Inspection Program (APIP) and are eligible for entry into California without physical inspection at a CDFA Border Protection Station.

(Shipments are subject to quarantine regulations upon entry at a CDFA Border Protection Stations)

Part 1 (To be completed by the certifying official at time of inspection)

Compliance Agreement No: UT2023-001	Total Colonies Certified: -3800-
Participant/Shipper Name: Johnny Appleseed	Business Name: Appleseed Bees'
Inspection/Shipping Site Address, City, & Zip code: 12345 Appleseed Rd Appleseed, WA 08234	
Outside Storage: <input checked="" type="checkbox"/> or Warehouse Storage: <input type="checkbox"/>	
Certifying Official Name and Signature: California Inspector	Date of Inspection: 11/02/2022

Part 2 (To be completed by the participant and accompany each shipment destined to California)

Certificate Number: UT2023-001-001	Date of Shipment: 12/12/2022
Colonies in this Shipment: 448	Receiver Phone #: (916) 555-5555
Receiver Name: Juan Valdez	Business Name: Appleseed Bees'
Destination Address, City and Zip code (complete address required) 5555 Apple Pond Rd, Jackson, CA 95642	

Part 3 (To be completed by the Driver before leaving the loading/shipping site)

Carrier Name: AG Transport	Carrier Unit #: 1977
Carrier Address: 645 Hwy. 139 Blackfoot, SD 57601	Trailer License # & State: 1158961 SD
Carrier Phone #: (605) 222-2222	
Driver License # and State: RJS-10A555G894 South Dakota	Driver DOB: 04/25/1977
Driver (First, Middle, & Last): Randal John Schwartz	

Drivers present this completed form to the inspector at a CDFA Border Protection Station

Shipper to complete Part 2. (Red Writing)
Certificate numbers shall be the compliance number and a sequential starting at 001
Example: UT2023-XXX-001

Carrier/Driver to complete Part 3. (Green Writing)

Shipment Tracking Log SAMPLE:



APIP - 002
Revised 08/08/2022

**Shipment Tracking Log
Apiary Pre-Shipment Inspection Program**

Shipper: Use this form to track shipments of certified apiary colonies to California. Make a separate entry for each shipment. After all certified colonies have been shipped, submit this form to: Utah Department of Agriculture & Food, via one of the following methods:

- e-mail to:
- fax:
- Mail:

Compliance Agreement #: UT2023-001		Total Colonies Certified: -3800-
Participant/Shipper Name: Johnny Appleseed	Business Name: Appleseed Bees'	
Inspection/Shipping Site Address, City, & Zip code: 12345 Appleseed Rd. Appleseed, UT 08234		
Certifying Official Name and Signature: California Inspector		Date of Inspection: 11/02/2022

Certificate Number	Shipment Date	Colonies in Shipment	Remaining Certified Colonies
UT2023-001-001	12/12/2022	448	3352
UT2023-001-002	12/12/2022	448	2904
UT2023-001-003	12/12/2022	408	2496
UT2023-001-004	12/12/2022	444	2052
UT2023-001-005	12/12/2022	448	1604
UT2023-001-006	12/12/2022	378	1226
UT2023-001-007	12/12/2022	448	778
UT2023-001-008	12/12/2022	488	290
UT2023-001-009	12/12/2022	290	0

Shipper to complete Part 2. (Red Writing)

Certificate numbers shall be the compliance number and a sequential starting at 001
Example:
UT2023-XXX-001

Voluntary Apiary Pre-Inspection Program
Compliance Agreement



By signing this document, I agree to adhere to the above conditions and understand deviation from these conditions may result in colonies being deemed ineligible for certification or my inability to participate in this program. I further understand CDFA reserves the right to inspect certified apiary colonies at its border protection stations for quality assurance purposes as deemed necessary.

Participant/Shipper Information: please complete by printing or typing.
One inspection site per form

Participant/Shipper Name:	Participant/Shipper Business Name:
Phone Number:	Total Colonies to Inspect:
Email Address:	
Mailing Address, City & Zip Code:	
Participant/Shipper Signature:	Date:
Issuing Official Name:	Issuing Official Signature:
Compliance Agreement Number:	

Storage Facility (Inspection Site) Information:

Storage Facility Name:		
Address, City & Zip Code:		
Storage Facility Type:	Wearhouse <input type="checkbox"/>	Potato Shed <input type="checkbox"/>
	Barn <input type="checkbox"/>	Field <input type="checkbox"/>
Known Small Hive Beetle Infestation: Yes <input type="checkbox"/>	No <input type="checkbox"/>	Total colonies infested with SHB:
GPS Coordinates of inspection Site:		
LAT:		LONG:
Participant/Shipper Phone Number(s) *For Day of Inspection*:		
Participant/Shipper Email Address:		
Total Colonies to Inspect at this Location:		

This agreement is to expedite the entry process at the CDFA border protection stations. Shipments are still subject to quarantine regulations upon entry at a CDFA border protection station and may be subject to random inspection.