

Atlantic Certified Organic Co-operative Ltd (ACO)

P.O. Box 40, Canning, N.S. B0P 1H0
Telephone: 1-888-375-9190, Fax: 902-582-3299, e-mail: info@atlanticcertifiedorganic.ca

Appendix E – Apiculture

1.0 Farm Name: _____ Date _____

2.0 Colony Information

2.1 How many apiaries do you have? _____

2.2 How many bee hives in total? _____

2.3 How are you regenerating your hives? purchasing nucs , splitting your own hives

a) If hives were purchased, were they from a certified organic beekeeper?

yes no.

Please indicate source _____

Certified by _____

b) If splitting your own hives, please describe how this is done.

3.0 Organic Plan

Briefly explain your organic plan in regard to beekeeping or indicate if already included in an overall organic plan for the farm. Included in farm plan

Farm Name _____

4.0 Location of Hives

4.1 How far from conventional agriculture are your colonies? _____

4.2 Are the hives at risk of contamination from prohibited sprays or GMO crops?

yes no

If yes, please describe how you reduce the risk. _____

4.3 What is the source of water for the colonies? _____

4.4 What are the foraging opportunities for the colonies, over the honey season?

4.5 Do you feed your colonies at any time? yes no

If yes;

a) What do you feed them? _____

b) What process do you use to feed the bees? _____

4.6 How much honey do you leave in each beehive for overwintering? _____

5.0 Management

5.1 How do you identify your hives? _____

5.2 How often do you monitor the hive activity? _____

5.3 What records do you keep for each hive? _____

5.4 What are the hives and foundations made of? _____

Farm Name _____

6.0 Health Care

6.1 When you enter a hive, what do you use in your smoker? yes no

6.2 How do you monitor the strength of a colony? _____

If necessary, how do you strengthen a colony? _____

6.3 How do you deal with disease in a colony? _____

6.4 How do you deal with mites? _____

6.5 Have you had any disease or mite problems? yes no

If yes, When? _____ What was the result? _____

6.6 Have you used antibiotics or prohibited substances to deal with these problems. yes no
If yes, please explain. _____

7.0 Extraction, Processing and Storage

7.1 When do you remove honey frames from the hives? _____

7.2 How and where do you store the frames until extraction? _____

7.3 How do you extract the honey? _____

7.4 Do you use any heat during extraction? yes no
If yes, what is the maximum temperature reached? _____

7.5 What type of packaging do you use to store the honey _____

7.6 Where and how do you store the honey? _____

7.7 Describe your lot numbering system. _____

Farm Name _____

7.8 If it becomes necessary, how do you de-crystallize the honey? _____

What is the maximum temperature reached during de-crystallization? _____

7.

8.0 Audit Trail

To be included with the application form:

- Provide a copy of your label.
- Provide a flow chart of the extraction process.

For verification during inspection:

- Records indicating purchases, management and disease control products

I, _____, hereby certify that the above information is accurate and complete.

Signature of Applicant _____ Date _____

ACO Office Use:

Date Application Received _____