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| **ANNUAL COLONY LOSS INQUIRY –**  **December 2016** |
|  | OMB No. 0535-0255 Approval Expires: 4/30/2018Project Code: 116 QID: 153782 – HQ SMetaKey: 3782 |
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| Please make corrections to name, address, and ZIP Code, if necessary. | **USDA/NASS**National Operations Division9700 Page Avenue, Suite 400St. Louis, MO  63132-1547Phone: 1-888-424-7828Fax: 1-855-515-3687E-mail: nass@nass.usda.gov |
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| **SECTION 1 – APIARIES**  |

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| 1. Between January 1, 2016, and December 31, 2016, did this operation own or control any apiaries? |
|   | 2720  | 1[ ] **Yes –** Continue | 3[ ] **No –** Go to Section 10 |

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| **SECTION 2 – JANUARY THROUGH MARCH 2016** |

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|  | **None** | **Colonies** |
| 2. On January 1, 2016, how many total colonies did this operation own, regardless of location? | [ ]  | 2721 |
| 3. Between January 1, 2016, and March 31, 2016, how many: |  |  |
| a. Colonies were completely lost/dead out? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2722 |
| b. Colonies were requeened (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| c. Received nucs or packages? (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| d. New colonies did you add? (Include splits, newly created, and replacements of lost/dead out colonies. Exclude colonies that were requeened and/or received nucs/packages in Item 3b. or 3c.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2724 |
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| **SECTION 3 – APRIL THROUGH JUNE 2016**  |

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|  | **None** | **Colonies** |
| 4. On April 1, 2016, how many total colonies did this operation own, regardless of location? | [ ]  | 2725 |
| 5. Between April 1, 2016, and June 30, 2016, how many: |  |  |
| a. Colonies were completely lost/dead out? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2726 |
| b. Colonies were requeened (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| c. Received nucs or packages? (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| d. New colonies did you add? (Include splits, newly created, and replacements of lost/dead out colonies. Exclude colonies that were requeened and/or received nucs/packages in Item 5b. or 5c.) . . . . . . . .. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2728 |

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| **SECTION 4 – JULY THROUGH SEPTEMBER 2016** |

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|  | **None** | **Colonies** |
| 6. On July 1, 2016, how many total colonies did this operation own, regardless of location? | [ ]  | 2729 |
| 7. Between July 1, 2016, and September 30, 2016, how many: |  |  |
| a. Colonies were completely lost/dead out? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2730 |
| b. Colonies were requeened (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| c. Received nucs or packages? (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| d. New colonies did you add? (Include splits, newly created, and replacements of lost/dead out colonies. Exclude colonies that were requeened and/or received nucs/packages in Item 7b. or 7c.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2732 |

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| **SECTION 5 – OCTOBER THROUGH DECEMBER 2016** |

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|  | **None** | **Colonies** |
| 8. On October 1, 2016, how many total colonies did this operation own, regardless of location? | [ ]  | 2733 |
| 9. Between October 1, 2016, and December 31, 2016, how many: |  |  |
| a. Colonies were completely lost/dead out? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2734 |
| b. Colonies were requeened (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| c. Received nucs or packages? (Exclude colonies that were completely lost/dead out in Item 3a.) . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | xxxx |
| d. New colonies did you add? (Include splits, newly created, and replacements of lost/dead out colonies. Exclude colonies that were requeened and/or received nucs/packages in Item 9b. or 9c) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2736 |
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| **SECTION 7 – LOSS IN 2016** |

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| 11. Of the total colonies **lost** between January 1, 2016, and December 31, 2016, did any colonies experience **all** of the following symptoms? |

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| * Little to no build-up of dead bees in the hive or at the hive entrance
* Rapid loss of adult bee population despite the presence of queen, capped brood, and food reserves
* Absence or delayed robbing of the food reserves
* Loss not attributable to Varroa or Nosema loads
 |
| 2742 | 1[ ] **Yes –** Continue3[ ] **No –** Go to Section 84[ ] **No Loss –** Go to Section 82[ ] **Don't Know –** Go to Section 8 |
|  | **Colonies** |
| 12. How many colonies did you lose that experienced **all** of the symptoms in Item 1? . . . . . . . . . . . . .  | 2743 |
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| **SECTION 8 – COLONY HEALTH IN 2016** |

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| 13. Of the total colonies owned between January 1, 2016, and December 31, 2016, how many colonies were affected by the following, but not necessarily lost? **Note**: The total of rows a through h, may exceed the total number of colonies. |
|  | **None** | **Colonies** |
| a. Varroa Mites . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2744 |
| b. Other Pests and Parasites1 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2745 |
| c. Diseases2 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2746 |
| d. Pesticides . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2749 |
| e. Other5 (Specify) 2750 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | [ ]  | 2751 |
| f. Unknown . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | [ ]  | 2752 |
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| 1/ Includes Tracheal Mites, Nosema, Hive beetle, Wax moths, etc.2/ Includes American and European foulbrood, Chalkbrood and Stonebrood, Paralysis (acute and chronic), Kashmir, Deformed Wing, Sacbrood, IAPV, Lake Sinai II, etc.5/ Includes weather, starvation, insufficient forage, queen failure, hive damage/destroyed, etc. |
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| **SECTION 9 – COMMENTS** |

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| **SECTION 10 – CHANGE IN OPERATION**  |  |
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| 1. Has the operation named on the label been sold or turned over to someone else? |
|  1[ ] **Yes** – Identify the new operator(s) 3[ ] **No** – Go to Section 9 |
|  Operation Name:  |
|  Operator Name:  |
|  Address:  |
|  City: State: Zip:  |
|  Phone: ( ) -  |

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| **SECTION 11 – CONCLUSION**  |  |
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| 1. Do you make any day-to-day decisions for any other apiaries?  |
| 1[ ] **Yes –** List other operations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3[ ] **No** |
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| **THANK YOU FOR YOUR COOPERATION** |
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| 2. **SURVEY RESULTS**: To receive the complete results of this survey on the release date, go to <http://www.nass.usda.gov/Surveys/Guide_to_NASS_Surveys/> |

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|  Would you rather have a brief summary mailed to you at a later date? 9990 1[ ] **YES** 3[ ] **NO**  |  |

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| Respondent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 9911 Phone: (\_\_\_\_\_) \_\_\_\_\_–\_\_\_\_\_\_\_\_\_\_ | 9910 MM DD YY Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ |
|  |
| **Response** | **Respondent** | **Mode** | **Enum.** | **Eval.** | **Change** | **Office Use for POID** |
| 1-Comp2-R3-Inac4-Office Hold5-R – Est6-Inac – Est7-Off Hold – Est | 9901 | 1-Op/Mgr2-Sp3-Acct/Bkpr4-Partner9-Oth | 9902 | 1-Mail2-Tel3-Face-to-Face4-CATI5-Web6-e-mail7-Fax8-CAPI19-Other | 9903 | 9998 | 9900 | 9985 | 9989 | \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ |
|  |
| **Optional Use** |
| 9907 | 9908 | 9906 | 9916 |
| S/E Name |  |  |  |  |