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| **BEE AND HONEY INQUIRY –**  **December** **2017** | | | | |
|  | | | OMB No. 0535-0153  Approval Expires: 12/31/2018  Project Code: 196  SMetaKey: 2380 Version 1 | |
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| **SURVEY_LOGO_1:USDA_logo_bw.gif** | **United States**  **Department of**  **Agriculture** |
|  |  | Annual Survey of Operations with 5 or more colonies | **http://nassnet/miso/PRIME_Center/Communication_Guidelines/Official_Logos/NASS%20Graphic/nass_logo_bw.gif** | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |

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| Please make corrections to name, address, and ZIP Code, if necessary. | **USDA/NASS** **Alabama**  National Operations Division  9700 Page Avenue, Suite 400  St. Louis, MO  63132-1547  Phone: 1-888-424-7828  Fax: 1-855-415-3687  E-mail: nass@nass.usda.gov |
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| The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: https://www.nass.usda.gov/confidentiality. Response is **voluntar**y. | | | | | | | |
| According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0153. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. | | | | | | | |
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| **State** | **POID** | **Tract** | **Subtr.** |  |  |  |  |
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| 1. During 2017, did this operation own or control any apiaries? | | |
| 2701 | **1****Yes -** Go to Item 3, page 2 | **3****No -** Continue |

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| 2. Did this operation have any honey stocks for sale in 2017from any production year? | | |
| 2703 | **1****Yes -** Go to Item 3 , page 2 (Complete columns 1 through 5) | **3****No -** Go to Item 5, page 3 |

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| **Please Complete the Following Questions for All Apiaries You Owned or Controlled During 2017** |

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| 3. Report for each State in which you had colonies or stocks, starting with **Alabama** first. It is possible to report the same colonies in more than one State. |

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| **1** | **2** | **3** | **4** | **5** |
| **State**  (List all States in which this operation had colonies in **2017** or stocks from any year.) | **What was the largest number of colonies, for all purposes, that this operation had in 2017 in this State?**  (Include colonies for honey production, pollination, hobby, etc.)  **Colonies** | **From how many of these colonies did you harvest or “pull off” honey in this State?**  **Colonies** | **How many total pounds of honey were harvested in this State from these colonies?**  **Pounds** | **How many pounds of honey stocks did this operation have for sale in this State on Dec 15th 2017?**  (Exclude honey under government or CCC loans.)  **Pounds** |
| **Alabama** | 701 | 702 | 703 | 704 |
| 800  State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 801 | 802 | 803 | 804 |
| 800  State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 801 | 802 | 803 | 804 |
| 800  State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 801 | 802 | 803 | 804 |
| 800  State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 801 | 802 | 803 | 804 |
| 800  State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 801 | 802 | 803 | 804 |
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| 4. How many **TOTAL POUNDS** of honey did this operation harvest in all States in 2017? (Total should be sum of column 4.) . . . . . . . . . . . . . . . . . . | 880 |  |
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| 5. Did you **sell** anyhoneyduring **2017**?(Include **sales** of honey produced in **2016**.) | | |  |
| 720 | 1 **Yes –** Continue | 3 **No –** Go to Item 7 |  |

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| 6. Please report **2017** sales of honey, by class and by year of production. Report the pounds sold and dollars received in **2017** by this operation for honey produced by this operation in **2016** and **2017**.  (**Do not include resale** of honey produced by another operation.) |

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| **HONEY**  **COLOR**  **CLASS** | **MARKETING CHANNEL** | **HONEY PRODUCED BY THIS OPERATION IN 2017** | | **HONEY PRODUCED BY THIS OPERATION IN 2016** | |
| **Pounds Sold in 2017** | **Dollars Received in 2017 1/** | **Pounds Sold in 2017** | **Dollars Received in 2017 1/** |
| **Water white, extra white, and white**  **(0 – 34 mm)** | Sales to Cooperatives  (Exclude non-member sales) | 727 |  | 725 |  |
| Sales to Private Processing Companies  (Includes non-member sales to Cooperatives) | 723 | 724  $ | 721 | 722  $ |
| Wholesale Sales  (grocery stores, restaurants, distributors) | 718 | 719  $ | 716 | 717  $ |
| Retail Sales  (direct to consumers) | 731 | 732  $ | 729 | 730  $ |

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| **Extra light**  **amber**  **(35 - 50mm)** | Sales to Cooperatives  (Exclude non-member sales) | 739 |  | 737 |  |
| Sales to Private Processing Companies  (Includes non-member sales to Cooperatives) | 735 | 736  $ | 733 | 734  $ |
| Wholesale Sales  (grocery stores, restaurants, distributors) | 714 | 715  $ | 712 | 713  $ |
| Retail Sales  (direct to consumers) | 743 | 744  $ | 741 | 742  $ |

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| **Light amber,**  **amber and**  **dark amber**  **(51+ mm)** | Sales to Cooperatives  (Exclude non-member sales) | 751 |  | 749 |  |
| Sales to Private Processing Companies  (Includes non-member sales to Cooperatives) | 747 | 748  $ | 745 | 746  $ |
| Wholesale Sales  (grocery stores, restaurants, distributors) | 775 | 776  $ | 773 | 774  $ |
| Retail Sales  (direct to consumers) | 755 | 756  $ | 753 | 754  $ |

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| **Area specialties: Sourwood, tupelo, buckwheat, etc.**  (Honey not included in any of the above color classes) | Sales to Cooperatives  (Exclude non-member sales) | 763 |  | 761 |  |
| Sales to Private Processing Companies  (Includes non-member sales to Cooperatives) | 759 | 760  $ | 757 | 758  $ |
| Wholesale Sales  (grocery stores, restaurants, distributors) | 771 | 772  $ | 769 | 770  $ |
| Retail Sales  (direct to consumers) | 767 | 768  $ | 765 | 766  $ |
| 1/ Report receipts before deductions of marketing charges such as transportation, grading, container costs, etc. | | | | | |
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| **NOTES/COMMENTS** |

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| 7. During 2017, did this operation receive any income from contracting colonies as pollinators? | | |  |
| 1856 | 1**Yes –** Go to Item 7a | 3**No –** Go to Item 8 |  |
| a. What was your total dollar amount received from contracting colonies for pollination? . . . . . . . . | | | 1857  $ |
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| 8. During 2017, did this operation receive any other income from honey bees? (Including sales of queen/queen cells, nucs and packages, beeswax, propolis, etc.) | | | |
| 1858 | 1**Yes –** Go to Item 8a | 3**No –** Go to Item 9 |  |
| a. What was your total other income from honey bees? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | 1859  $ |
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|  | | **Queens** |
| 9. During 2017, how many self-created queens were used on this operation for requeening or creating new colonies? (Exclude queens reared for sale.) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | 1871 |
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| 10. In 2017, how many queens, packages, and nucs were purchased by this operation, and what was the amount spent on those items? | **None** | **Number Purchased** | **Total Dollars Spent** |
| a. Purchased queens/queen cells? (Exclude self-created queens.) . . . . . . . . |  | 1872 | 1863  $ |
| b. Purchased packages? (with or without queen) . . . . . . . . . . . . . . . . . . . . . . |  | 1873 | 1864  $ |
| c. Purchased nucs? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  | 1874 | 1865  $ |
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| 11. In 2017, what were total expenditures for the following items on this operation: | **None** | **Total Dollars Spent** |
| a. Varroa control/treatment? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  | 1860  $ |
| b. Prevent/treat other colony health issues? (Including Nosema, tracheal mites, foulbrood, paralysis, Kashmir, cloudy wing, etc.) . . . . . . . . . . . . . . . . . . . . . . . . . . |  | 1861  $ |
| c. Feed? (Including syrup, sugar water, honey, pollen patties, and other feeds.) . . . |  | 1862  $ |
| d. New foundation for combs? (Exclude comb purchased with nucs.) . . . . . . . . . . . . |  | 1866  $ |
| e. New hives/woodenware? (Langstroth, top bar, other) . . . . . . . . . . . . . . . . . . . . . . |  | 1867  $ |
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| 12. During 2017, did this operation pay any fees to winter colonies in a warehouse or on land? | | |  |
| 1868 | 1**Yes –** Go to Item 12a | 3**No –** Go to Item 13 |  |
| a. What were your total fees/rent to winter your colonies? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | 1869  $ |

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|  | **Employees** |
| 13. During 2017, including yourself, what was the peak number of people working on your apiaries?  (Exclude employees that did not work with colonies, i.e. office staff, etc.) . . . . . . . . . . . . . . . . . . . . | 1870 |
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|  | **FOR OFFICE**  **USE ONLY** |
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| **NOTES/COMMENTS** |

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| **NOTES/COMMENTS** |

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| **Complete Items 14, 15, and 16 only if the operation named on the label did NOT report for Items 3, 4, or 6; otherwise,**  **go to Item 17.** | | | | | | | | |
| 14. Will this operation own or control any apiaries in 2018? | | | | | | | | |
| 2702 | | 1**Yes** | 3**No** | | | | |  |
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| 15. Has the operation named on the label been sold, rented, or turned over to someone else? | | | | | | | | |
| 1**Yes** – Continue | | | | 3**No** | GENERIC_IMAGE:longRightArrow.wmf | | Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year, or will you control or own bee colonies in the future? (Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees). | |
| 16. What is the name and address of the new operation  that has taken over the land or colonies? | | | | | | |  | |
| Operation Name:  Operator Name:  Address:  City: State: Zip:   Phone: | | | | | | | **Yes**   **Don’t Know**   **No** | |
|  | | | | | | | (Regardless of answer to above, write a note to explain the situation.) | |
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| 17. **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 1Yes 3No |  |

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| **This completes the survey. Thank you for your help.** |

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| **Comments:** |  |
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| Respondent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | 9911  Phone: (\_\_\_\_\_) \_\_\_\_\_–\_\_\_\_\_\_\_\_\_\_ | | | | | | 9910 MM DD YY    Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ | | | | | |
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| **Response** | | **Respondent** | | **Mode** | | | **Enum.** | **Eval.** | **Change** | **Office Use for POID** | | | | | | |
| 1-Comp  2-R  3-Inac  4-Office Hold  5-R – Est  6-Inac – Est  7-Off Hold – Est | 9901 | 1-Op/Mgr  2-Sp  3-Acct/Bkpr  4-Partner  9-Oth | 9902 | 1-PASI (Mail)  2-PATI (Tel)  3-PAPI (Face-to- Face)  6-Email  7-Fax  19-Other | | 9903 | 9998 | 9900 | 9985 | 9989 | | \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ | | | | |
|  | | | | | | |
| **Optional Use** | | | | | | |
| 9907 | | | 9908 | 9906 | | 9916 |
| S/E Name | | | | | | |  |  | |  | | | | |  | |