

MEDINA CENTRAL APPRAISAL DISTRICT

BEEKEEPING GUIDELINES



**Medina Central Appraisal District
1410 Avenue K
Hondo, Texas 78861
(830) 741-3035**

Beekeeping

This is additional information for beekeeping. Please refer to Medina Central Appraisal District Agricultural Guidelines for complete information on qualifying for agricultural use (1-d-1) valuation.

Intensity

The district's degree of intensity is six active hives (colonies) on the first five acres with one hive per additional 2.5 acres up to 20 acres.

ACRES	HIVES
5	6
7.5	7
10	8
12.5	9
15	10
17.5	11
20	12

Requirements: Five (5) – twenty (20) acres devoted to beekeeping

Six (6) – twelve (12) active hives of honeybees

- Each hive must include at a minimum one brood box (8 - 10 frames) with a cover and bottom
- Hives should be located on the property for the entire year, be maintained, and kept alive
- Due to the limited flowering vegetation located in our county, planting of flowering plants and shrubs may be necessary
- A beekeeping supplement and a 5-year plan of action are required to be submitted with the initial application.

The plan should include the following:

- Type of bees
- Number of hives
- Map with location of hives and plant life
- List of vegetation for food sources (all plant life intended to support hive)
- Marketing plan for production of human food or products that have commercial value
- Number of acres to be used for beekeeping
- Information about bee migratory habits
- The primary operation and any secondary uses of the bees
- Plans for expansion
- Contingency plan in case of a catastrophic disaster of hives

An annual report is required. This annual update provides the district with an overview of activities throughout the past calendar year and is due by February 28th of each year.

Typical Management Practices for Beekeeping

- Monitor bee health
- Hives maintained and kept alive
- Collection of honey and other products
- Provide supplemental food and water
- Control pests/management of disease
- Harvest and market products

The following agencies may be of assistance for information regarding beekeeping:

Texas Beekeepers Association

<https://texasbeekeepers.org/>
president@texasbeekeepers.org

Texas Hill Country Beekeepers Association

<https://www.facebook.com/TXHillCountryBKAssn/>
TexasHillCountryBeekeepers@gmail.com

Alamo Area Beekeepers Association

<https://alamobees.org/>
president@alamobees.org

Texas Apiary Inspection Service

<https://txbeeinspection.tamu.edu/>
tais@ag.tamu.edu

BEE INCOME AND EXPENSE WORKSHEET
Number of Colonies _____

	Quantity	Price	Total	Per Colony	Per Lb. of Honey
Income					
Retail sale of honey	_____	_____	_____	_____	_____
Wax	_____	_____	_____	_____	_____
Other sales	_____	_____	_____	_____	_____
Total Income	_____	_____	_____	_____	_____
Expenses					
Hives (boxes and frames)	_____	_____	_____	_____	_____
Hive wrap	_____	_____	_____	_____	_____
Protective clothing/gloves	_____	_____	_____	_____	_____
Smoker/Hive tools	_____	_____	_____	_____	_____
Top feeder w/ insert	_____	_____	_____	_____	_____
Queen excluder	_____	_____	_____	_____	_____
Escape board	_____	_____	_____	_____	_____
Bottling tank	_____	_____	_____	_____	_____
3-in-1 Extractor	_____	_____	_____	_____	_____
Bees/replacement bees	_____	_____	_____	_____	_____
Nucleus colony	_____	_____	_____	_____	_____
Parasite & disease control	_____	_____	_____	_____	_____
Varroa chemical control	_____	_____	_____	_____	_____
Other control	_____	_____	_____	_____	_____
Sugar	_____	_____	_____	_____	_____
Containers	_____	_____	_____	_____	_____
Glass jars	_____	_____	_____	_____	_____
Metal lids	_____	_____	_____	_____	_____
Labels	_____	_____	_____	_____	_____
Paint	_____	_____	_____	_____	_____
Food grade bucket w/spigot	_____	_____	_____	_____	_____
Vehicle mileage charge	_____	_____	_____	_____	_____
Labor	_____	_____	_____	_____	_____
Shipping costs	_____	_____	_____	_____	_____
Interest charge on assets	_____	_____	_____	_____	_____
Repairs	_____	_____	_____	_____	_____
Property taxes & insurance	_____	_____	_____	_____	_____
Fees, dues & registrations	_____	_____	_____	_____	_____
Marketing & administrative	_____	_____	_____	_____	_____
Total Expenses	_____	_____	_____	_____	_____
Profit (Loss) = Income - Expenses			_____	_____	_____
Market value property taxes	_____				

Use this worksheet to estimate or calculate your operation's income and expenses. At times property taxes at market value may be less than expenses to maintain an ag operation. This worksheet may be required for property owners submitting a 1-d-1 Application and/or a bee report.

Beekeeping Supplement

(Include with initial application)

Property Owner: _____

Phone Number: _____

Property ID(S): _____

Acreage Requirement: The State of Texas has set a minimum of 5 acres and a maximum of 20 acres to qualify beekeeping as an agricultural use.

Number of acres on this application is _____

When property owners initially qualify for agricultural appraisal, they must show proof of history of agricultural use for any of the five out of seven preceding years. One way to do this is to ask for export, import or intra-state permits, which are required by the Texas Apiary Inspection Service to transport hives. When did you receive your bees? _____

Attach a copy of the apiary receipt from your purchase.

When did you obtain your equipment for the bees? _____

What type of bees are you raising? _____

How long have you been raising bees? _____

How many colonies do you have on the property now? _____

If you have less colonies than required, please explain why: _____

Who will be managing the bee colony? _____

Is there a hired bee wrangler? If yes, who? _____

Describe any beekeeping education obtained: _____

Are annual records kept for expenses and sales? _____. Please attach Bee Income and Expense Worksheet.

DESCRIBE THE PRODUCTS YOU EXPECT TO HARVEST:

- ____ Honey [Extracted, Comb, Chunk, Creamed or Whipped Honey]
- ____ Beeswax
- ____ Propolis
- ____ Royal Jelly
- ____ Pollen
- ____ Bees/queens

Expected pound of production per hive is _____

How do you plan to market your products? _____

DESCRIBE ANY POLLINATION PLANS FOR YOUR PROPERTY: What plants are on your property now? Do you have clover?

Have you planted specific flowers for the bees? _____

PLEASE NOTE: The bees must be alive, active & producing to qualify & are subject to annual verification.

SIGNATURE: _____ **DATE:** _____

Printed Name: _____

*Attach additional sheet to provide more information if necessary.

Beekeeping Annual Report Checklist

Property Owner: _____

Phone Number: _____

Property ID(S): _____

- Provide land map with location of hives.
- Total number of **active** colonies _____
- How many hives if any have been replaced since original purchase _____ What was the cause(s) for replacement (wax moths, varroa mites, drought) _____
Include photos of damages to hives if available
- Number of hives harvested _____
- Number of times the frames harvested in the last year _____
- Pounds of honey produced _____
- Products harvested: _____ Honey _____ Propolis _____ Pollen
 _____ Beeswax _____ Royal Jelly _____ Bees/queens
- Inspections: (Include maintenance log of the hives)
 - How often _____
 - When/times of year _____
- Additional bees purchased during the year _____
- Queen Replacement _____
 - How often _____
 - Last replacement _____
- Predator prevention _____
 - Africanized bees _____
 - Fire ants _____
 - Other _____
- Supplemental feeding of bees: (Include feeding log of the hives)
 - How much _____
 - What _____
 - When _____
- Planting of clover, shrubs, flowering plants, etc. _____
- Winter activity _____
 - Electric light _____
 - Inactive/hibernate _____
- What products were purchased for the operation _____
- Please include any additional/supporting documentation that is relevant _____
- List other properties where you maintain bees _____
- Please include annual income/expense records and additional/supporting documentation that is relevant to the operation

SIGNATURE: _____

DATE: _____

HIVE INSPECTION SHEET (EXAMPLE 1)

Property Owner Name and Phone Number: _____

Property ID: _____

WHY INSPECT BEEHIVES?

The only way to know exactly what is going on in a beehive is to look inside.

DATE/TIME OF DAY _____ **HIVE 1** **HIVE 2** **HIVE 3** **HIVE 4** **HIVE 5** **HIVE 6**

GENERAL HIVE APPEARANCE

Are the bees actively entering/exiting the hive? _____

Are the bees bringing in pollen? _____

Are there signs of robbing? _____

Are there signs an animal has been disturbing the hive?
(Chew or scratch marks from skunks, raccoons, etc.) _____

Are the bees calm when you open the hive?
(An agitated or disorganized colony can indicate: queenlessness, poor weather/inspection timing, or a recent intruder.) _____

REPRODUCTION

Is the brood pattern good? (A quick look can indicate the presence of disease or an unwell queen.) _____

Are larvae healthy, white, and shiny? _____

Is royal jelly present in cells with larva? _____

Is there brood in capped and uncapped cells? _____

Is there one egg or larva per cell? _____

SIGNS OF PESTS

Mites test results (A visual inspection is insufficient proper testing is the only way to get an accurate estimate of the mite population.) _____

Are ants present? _____

Are wax moths present? _____

Is there an unusual number of dead bees? _____

Is there an odor? (Could be foulbrood.) _____

CAPACITY

How many frames are "covered" in bees?
(Some say counting "seams of bees." Look down into a box and see how many seams between frames are full of bees.) _____

How many frames are being fully or almost fully used for brood? _____

If in a nectar flow, do my bees have space to store nectar?
(Do the bees have empty comb and/or new frames to build comb where they can store nectar OR do I need to add a super?) _____

Has there been a substantial change in total population since the last inspection? _____

WEATHER CONDITIONS

Temperature/Precipitation _____

This is an example of an inspection sheet to be maintained. Another form or your own notes are also acceptable.

Hive Inspection Sheet (Example 2)

Property Owner Name and Phone Number: _____

Property ID: _____

Hive ID _____ Date _____ Who worked hive: _____

Hive Type: Langstroth Top Bar Warre Frames per Box: 8 10 other _____

Hive components: # _____ Deep Boxes # _____ Western # _____ Shallow

<p>Hive Temperament <input type="checkbox"/> Calm <input type="checkbox"/> Nervous <input type="checkbox"/> Aggressive</p> <p>Saw Queen <input type="checkbox"/> No <input type="checkbox"/> Yes (Marked? <input type="checkbox"/> No <input type="checkbox"/> Yes - Color _____)</p> <p>Laying pattern <input type="checkbox"/> Beautiful (Solid & Uniform) <input type="checkbox"/> Mediocre (Little spotty) <input type="checkbox"/> Poor (Spotty)</p> <p>Eggs seen <input type="checkbox"/> No <input type="checkbox"/> Yes Comments: _____</p> <p>Population <input type="checkbox"/> Heavy <input type="checkbox"/> Moderate <input type="checkbox"/> Low</p> <p>Excessive drone cells <input type="checkbox"/> No <input type="checkbox"/> Yes Drone Population Estimate: <input type="checkbox"/> Low: 30< <input type="checkbox"/> Ave.: 30 to 100 <input type="checkbox"/> High: 100+</p> <p>Queen cells <input type="checkbox"/> No <input type="checkbox"/> Yes Along frame bottom: # _____ Converted worker cell: # _____</p> <p>Disease/Pests <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> CB <input type="checkbox"/> Nosema <input type="checkbox"/> Mites <input type="checkbox"/> EFB <input type="checkbox"/> AFB <input type="checkbox"/> Hive Beetle Other: _____</p>	<p>Food Stores:</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;"></th> <th style="width:20%; text-align: center;">Honey</th> <th style="width:20%; text-align: center;">Pollen</th> </tr> </thead> <tbody> <tr style="background-color: #cccccc;"> <td>High (Everywhere)</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td>Average</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr style="background-color: #cccccc;"> <td>Low</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td>Near Brood</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Hive Condition <input type="checkbox"/> Normal <input type="checkbox"/> Brace Comb <input type="checkbox"/> Excessive Propolis <input type="checkbox"/> Normal odor <input type="checkbox"/> Foul odor <input type="checkbox"/> Equip. Damage Other: _____</p> <p>Actions Taken: <input type="checkbox"/> Fed hive <input type="checkbox"/> Added super(s) # _____ D _____ W _____ S <input type="checkbox"/> Split hive (new hive # _____) <input type="checkbox"/> Added Excluder <input type="checkbox"/> Requeened <input type="checkbox"/> Added Feeder <input type="checkbox"/> Swapped brood boxes Other: _____</p> <p>Medications</p> <table style="width:100%; border-collapse: collapse;"> <tr style="background-color: #cccccc;"> <td colspan="3">Added</td> </tr> <tr> <td><input type="checkbox"/> Apistan</td> <td><input type="checkbox"/> Formic acid</td> <td><input type="checkbox"/> Crisco patties</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Terramycin patties</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other: _____</td> </tr> <tr style="background-color: #cccccc;"> <td colspan="3">Removed</td> </tr> <tr> <td><input type="checkbox"/> Apistan</td> <td><input type="checkbox"/> Formic acid</td> <td><input type="checkbox"/> Crisco patties</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Terramycin patties</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other: _____</td> </tr> </table> <p>Recommendations: <input type="checkbox"/> Add supers <input type="checkbox"/> Split <input type="checkbox"/> Replace Queen <input type="checkbox"/> Swarming imminent – needs monitoring <input type="checkbox"/> Replace Equipment -What: _____</p>		Honey	Pollen	High (Everywhere)	<input type="checkbox"/>	<input type="checkbox"/>	Average	<input type="checkbox"/>	<input type="checkbox"/>	Low	<input type="checkbox"/>	<input type="checkbox"/>	Near Brood	<input type="checkbox"/>	<input type="checkbox"/>	Added			<input type="checkbox"/> Apistan	<input type="checkbox"/> Formic acid	<input type="checkbox"/> Crisco patties	<input type="checkbox"/> Terramycin patties			<input type="checkbox"/> Other: _____			Removed			<input type="checkbox"/> Apistan	<input type="checkbox"/> Formic acid	<input type="checkbox"/> Crisco patties	<input type="checkbox"/> Terramycin patties			<input type="checkbox"/> Other: _____		
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Interesting observations: