**Certified Naturally Grown Apiary Inspection Forms**

Beekeeper(s): _________________________  Apiary Name: ______________________________

Inspector: ____________________________  Affiliation (Bee Club/Apiary): _______________________

Inspector is: □ CNG Beekeeper  □ Beekeeper using natural practices

☐ Beekeeping instructor  □ Customer (1 of 3)  □ Certified Organic Beekeeper

Date of the inspection: ______________________  Total Inspection Time:________________________

---

**INSTRUCTIONS**

The goal of the inspection is two-fold. In part, the inspection aims to verify that the CNG standards are being upheld. Equally important, the inspection offers an opportunity for beekeepers to systematically review their practices with the inspector and reflect on how to improve sustainability in their operation. Before you get started, we recommend you obtain a copy of the Apiary Standards from the CNG website (at CNGfarming.org/apiary), or ask the beekeeper if they’ll have one on hand.

The Inspector should:

- Determine compliance with CNG standards
- Offer feedback and recommendations
- Share insights and suggestions to help the beekeeper set sustainability goals
- Use the Worksheets to note highlights of what’s reported and discussed
- Review List of Inputs and Sustainability Goals
- Carefully complete the Summary Inspection Report and Inspector Contact Information (final two pages)
- Return the Summary Inspection Report and Inspector Contact Information, plus your completed Inspection Worksheets, to CNG

The Beekeeper should:

- Before inspection: complete the List of Inputs on page 7 for the inspector to review on site
- During: walk through operation with inspector answering questions and sharing openly
- During or before: Complete the Sustainability Goals section (optional)
- After: make a copy of the completed Worksheets, Summary Report, Overview, and List of Inputs to keep on file at the apiary (optional but recommended)

---

**PLEASE REMEMBER:** It is easy to get side-tracked into specific conversations and discussions. Do that after the inspection is complete. Do your best to stay on track and perform a thorough inspection.

**INSPECTION WORKSHEETS**

<table>
<thead>
<tr>
<th>I. On-Site Observations: (please indicate YES/NO and write any notes into the space provided)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong> Do the hives seem adequately supported by the nectar and pollen supply in the surrounding area? (ie. not too many hives)</td>
</tr>
<tr>
<td><strong>B.</strong> Is the land on which the hives are located free of synthetic fertilizers, pesticides, herbicides and fungicides and genetically engineered crops?</td>
</tr>
<tr>
<td><strong>C.</strong> If located in a residential area, are the hives situated with sensitivity to neighbors’ interests?</td>
</tr>
<tr>
<td>Question</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>D. Are all hives situated so they’re likely to get at least four hours of sunlight per day?</td>
</tr>
<tr>
<td>E. Does the construction and location of the hives appear to provide adequate ventilation?</td>
</tr>
<tr>
<td>F. Is there an appropriate clean water source within ½ mile?</td>
</tr>
<tr>
<td>G. Is there a system in place to mark the brood frames to ensure that no brood frame comb in the hive is more than 5 years old?</td>
</tr>
<tr>
<td>H. Do you detect any paint or chemical treatment on the interior surfaces of the hives? <em>(Please note this is not allowed)</em></td>
</tr>
<tr>
<td>I. Do all hives have removable frames?</td>
</tr>
<tr>
<td>J. If they’re ‘Langstroth’ hives, are there separate chambers for brood and honey?</td>
</tr>
</tbody>
</table>

### General Practices:

<table>
<thead>
<tr>
<th>Question</th>
<th>YES / NO / NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. (i) What guidelines does the beekeeper use in determining how much honey to remove from the hive?</td>
<td></td>
</tr>
<tr>
<td>A. (ii) Do they ensure enough remains for the bees so as to avoid the need for excessive sugar feeding afterwards? <em>(required)</em></td>
<td></td>
</tr>
<tr>
<td>B. What does the beekeeper use for supplemental feeding? <em>(Please note the following are not allowed: high fructose corn syrup, liquid sugar syrup purchased with stabilizers or additives, unrefined cane sugar)</em></td>
<td></td>
</tr>
<tr>
<td>C. Does the beekeeper refrain from having honey supers on the hive during, or within two weeks of, supplemental feeding?</td>
<td>YES / NO</td>
</tr>
<tr>
<td>D. (i) Does the beekeeper harvest any wax to be re-used in the hive?</td>
<td>YES / NO</td>
</tr>
<tr>
<td>D. (ii) Do they only use honey super cappings wax from CNG hives?</td>
<td>YES / NO</td>
</tr>
</tbody>
</table>
D. (iii) Do they remove impurities by rendering (without the use of copper or iron)?  **YES / NO**  
(yes answer to both is required)

E. (i) Does the beekeeper harvest pollen or propolis?  **YES / NO**
**If so…**
E. (ii) Is the pollen purified of bee parts and other foreign matter?  **YES / NO**

E. (iii) Is the beekeeper careful to harvest pollen and propolis only from healthy hives?  **YES / NO**  
(yes answer to both is required)

E. (iv) What measures are taken to ensure pollen and propolis are not over-harvested?

F. (i) Are hives ever moved for pollination or other purposes?  **YES / NO**
**If so…**
F. (ii) Are they moved more than three times per year (other than for emergencies)?  **YES / NO**

F. (iii) Are they moved to non-certified apiaries?  **YES / NO**  
(no answer to both is required)

F. (iv) Does the beekeeper have contracts with any crop producers for whom pollination services are being provided, specifying that all crops on the land managed by the producer will meet all CNG guidelines during pollination, and for three months prior to arrival of the bees?  
(Such contracts are required)  **YES / NO**

G. (i) Is there a control program for Varroa Mites?  **YES / NO**
G. (ii) If **yes**, please specify control measures:

H. (i) What has been the beekeepers experience with diseases, such as:  
**AFB, EFB, nosema, tracheal mite, chalkbrood, and viral diseases?**

H. (ii) What steps have they taken to prevent these diseases?

H. (iii) What treatments have been used, if any? Are these treatments allowed in the CNG program?

I. What has been the beekeeper’s experience with wax moth and small hive beetle, and what steps have been taken to control these pests?

J. (i) Are the beekeeper’s hives in transition?  **YES / NO**  
(They are if: the brood comb may have been exposed to Tylan and/or three or more treatments of fluvalinate or amitraz, and/or came from another apiary, including nucs, except those from a CNG-approved apiary)

J. (ii) If so, confirm plans to remove treated/purchased brood comb within 2 years, and make sure they’re no
more than 40% of total frames.

K. (i) Does the beekeeper label their product as a varietal (orange blossom, sourwood, etc)?  YES / NO

K. (ii) If so, do they ensure that at least 51% of the nectar was derived from the named variety?  YES / NO

L. Is honey from this apiary mixed with honey from a non-certified apiary and then marketed as Certified Naturally Grown? (prohibited)  YES / NO

M. (i) Does the beekeeper purchase honey for re-sale?  YES / NO

M. (ii) If so, is it packaged differently than the CNG honey?  YES / NO

M. (iii) How does the purchased honey get marketed? Is it distinguished from the beekeeper’s own honey?  YES / NO

N. Is honey from this apiary mixed with any other ingredients and then marketed as CNG honey? This is allowed only if the other ingredients are CNG or certified organic flavoring agents, such as herbs. The addition of artificial sweeteners or other altering agents is strictly prohibited  YES / NO

### III. Reviewing Records: Ask to see the beekeeper’s records. They should include:

| A. Records of varroa levels and treatments (only for treated hives) | Yes / No / N/A |
| B. All disease and treatment types and dates | Yes / No / N/A |
| C. Hive locations and movement dates for all hives | Yes / No / N/A |
| D. Records of any previous wax exposure to prohibited substances, and the removal schedule for these frames | Yes / No / N/A |
| E. Records of brood frame marking for purpose of scheduled removal (A.4.) | Yes / No / N/A |
| F. Pollination contracts (if offering pollination services) | Yes / No / N/A |
| G. CNG inspection dates and notes on inspector’s key observations | Yes / No / N/A |

*If any of the above records was missing, what are the beekeeper’s plans to maintain such records?
LIST OF INPUTS

To expedite the process, this list may be completed beforehand by the beekeeper and then reviewed on site by the inspector. Alternatively, the inspector can fill it in during the inspection.

Find allowed and prohibited inputs for CNG operations at CNGfarming.org/apiary. It is not a comprehensive list, but includes the most common inputs. As always, if you have a question on a specific product, feel free to contact CNG.

List all inputs used for beekeeping.

<table>
<thead>
<tr>
<th>Product</th>
<th>Use</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List the inputs used to manage fertility, weeds, pests, and disease on the land where apiary/ies is/are located.

<table>
<thead>
<tr>
<th>Product</th>
<th>Use</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C. Can the beekeeper explain to you how s/he evaluates whether or not a product is approved for use in CNG production?

D. Are there any inputs that could be eliminated or reduced through cultural practices? Could any be replaced with a product produced locally? Could any be replaced with a milder form?
INSPECTION OVERVIEW

A. Describe notable or outstanding aspects of the farm operation.

B. You may find minor violations that aren’t grounds for removal from the CNG program but that should be addressed in order for the apiary’s certification to be continued. Do you recommend any Corrective Actions be taken to bring the apiary into stronger alignment with CNG standards and/or principles? (These should also be noted in the Inspector Contact Information page.) In what timeframe would you recommend that they be addressed (eg. immediately, within two months, by next year’s inspection, etc)?

<table>
<thead>
<tr>
<th>Corrective Action</th>
<th>Time Frame</th>
</tr>
</thead>
</table>

C. Discuss any Corrective Actions that were noted by the last inspector and indicate whether and how they have been acted upon

SUSTAINABILITY GOALS: going beyond the core standards (Optional)

Sustainability is an ongoing process and is context specific. We are united by our commitment to caring for the earth and our families with the long-term view in mind. Certified Naturally Grown is largely focused on ecological sustainability; however, to ensure the continued success of any farm – and the sustainable agriculture movement – it’s important to include the economic and social aspects of sustainability as well.

The beekeeper should take this opportunity to reflect on and set some goals for improving sustainability on his or her operation using the inspector as a sounding board. These may be short-term or long-term goals and could be in any of the following areas or others:

- **Soil**: preventing erosion and runoff, building organic matter, cover cropping, reducing compaction
- **Water**: Use efficiency, rain water capture, run-off prevention, protecting wetlands and waterways
- **Inputs**: Use efficiency, reducing use, replacing with local products and/or preventative practices
- **Biodiversity**: Protecting/providing habitat for wildlife, buffering wild areas
- **Supporting biological cycles**: Habitat for pollinators, beneficial insects
- **Energy**: Energy efficiency, renewable energy
- **Waste**: Reduction, reuse, recycling
- **Economic viability** Maintain/improve the bottom line; pay yourself and staff fair wages.
- **Engaging the community**: Educate the public, increase food access
- **Genetic diversity and adaptability**: Increasing each by sourcing locally, using splits

For the beekeeper being inspected: What are 3 goals for improving sustainability of your operation in the short term and long term? Discuss strategies to achieve these goals. **Write one above your signature on the Inspection Report**

<table>
<thead>
<tr>
<th>Goal</th>
<th>Time frame</th>
<th>Steps necessary to make it happen</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CHECKLIST

Did you take a look at and/or ask about these items?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes / No / N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Harvesting Honey – processing and amounts</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>B. Wax – processing for re-use in hive</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>C. Pest Pressures</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>D. Disease</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>E. Labeling and marketing</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>F. Records</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>G. Transition schedule for treated or purchased brood comb</td>
<td>Yes / No / N/A</td>
</tr>
<tr>
<td>H. Other</td>
<td>Please Specify:</td>
</tr>
</tbody>
</table>

Finally, and most importantly, do YOU feel the bees in this apiary are well cared for? Why or why not?

The NEXT pages are scanned in and made public! You may use the empty space below and the above worksheets to make notes and recommendations to the beekeeper or recognize areas of excellence.

Please be sure to leave notes for the beekeeper to file with their records about any areas of concern that should be reviewed by the next inspector (need to improve records, hive ventilation, exposure to adequate sun, etc.)
This page intentionally left blank.
Certified Naturally Grown  
**APIARY SUMMARY INSPECTION REPORT**

Beekeeper(s): _________________________  
Apiary Name: _________________________

Inspector: ____________________________  
Affiliation (Bee Club/Apiary): ___________

Inspector is:  
□ CNG Beekeeper  □ Beekeeper using natural practices  
□ Educator of natural beekeeping  □ Customer (1 of 3)  □ Certified Organic Beekeeper

Date of the inspection: _____________________  
Total Inspection Time: ____________________

Based on my observations and interview with the beekeeper(s), I feel confident in making the following declarations about the operation:

- The beekeeper is careful to make sure that no prohibited insecticides, herbicides, fungicides, chemical fertilizer, or genetically modified crops are used on the land where the apiary is located.  
  Agree / Disagree _________  
  (Your initials)

- The hives are located in an area/s with abundant and diverse pollen and nectar sources that are adequate to support the health of the apiary’s bee population.  
  Agree / Disagree _________  
  (Your initials)

- The beekeeper refrains from the use of synthetic in-hive treatments.  
  Agree / Disagree _________  
  (Your initials)

- The beekeeper refrains from overaggressive harvesting of honey and excessive feeding of sugar.  
  Agree / Disagree _________  
  (Your initials)

- The beekeeper demonstrates a commitment to sustainable practices that seek to protect and improve the health of the honey bee population.  
  Agree / Disagree _________  
  (Your initials)

I feel confident in recommending that the above listed producer(s) and their apiary…

**be included**  
**not be included**

...in the Certified Naturally Grown program.

Signature of Inspector _____________________  
Date ________________

As a CNG beekeeper I’m committed to continually enhancing my apiary’s sustainability. During the next twelve months I will...

Signature of Beekeeper _____________________  
Date ________________
INSPECTOR CONTACT INFORMATION

This information will be kept completely confidential but is required for this form to be valid. It is only so we have the option to contact you with any follow-up questions and/or to confirm that you conducted the inspection and filled in this form.

Apiary you inspected:_____________________________________________________
Your Name:________________________________ Affiliation:________________________
Your Phone:________________________ Your Email:____________________________
Your Mailing Address:______________________________________________________

☐ I recommend this apiary ☐ I recommend the apiary with minor corrective actions ☐ I don’t recommend this apiary for CNG certification

If you’d like to recommend this apiary for certification, you’re almost done! But FIRST:

☐ Did you sign the Summary Inspection Report at the bottom?
☐ Did the beekeeper sign too?
☐ Did you initial the agree/disagree statements?
☐ Did you indicate your apiary/affiliation on the summary report?

Please return all these Inspection Forms to CNG using one of these three methods:

We encourage you to email scanned images of your report. Doing so will help us reduce paper waste, and support our shift to more efficient electronic record keeping. (Free apps for scanning using your smart phone are noted below). We prefer it when all pages are merged together into a single PDF.

Mail to:
Certified Naturally Grown
540 President Street, Third Floor
Brooklyn, NY 11215

Fax to: 718-596-4697

Email to: forms@naturallygrown.org

Free phone apps: iScanner or DocScan

Kindly merge all individual pages into a single PDF file

Inspection forms can be downloaded at http://CNGfarming.org/CNGforms

Don’t hesitate to contact us if you have any questions: forms@naturallygrown.org or 845-687-2058