



Pesticide Risk Management Plan

Beekeeper's contact details	
Beekeeper's name	
Beekeeper's emergency phone contact 1	
Beekeeper's emergency phone contact 2	
Farmer's contact details	
Farmer's name	
Farmer's emergency phone contact 1	
Farmer's emergency phone contact 2	
Key dates	
Hive placement (start of job)	
Hive removal (end of job)	
Has the beekeeper...	
Ensured that their contact details are displayed at the hive location and can be read from a safe distance?	
Identified neighbouring landowners / aerial spray operators who should be notified?	
Worked through a copy of this form with those neighbouring landowners / aerial spray operators?	
Considered shelter from spray drift when determining where to site the hives?	
Identified a safe area, (at least 3 kms away) that hives can be relocated to if required?	
Ensured that bees have access to a safe water source, free of chemical contamination?	
Discussed the chemical application program with the farmer?	
ATTENTION! All of the above should be actioned before hives are placed on site.	
Has the farmer...	
Advised the beekeeper of neighbouring landowners / aerial spray operators who should be notified?	
Ensured that staff, spray contractors and agronomists are aware of the presence and location of the hives and understand the points below: <ul style="list-style-type: none"> • Read and comply with the chemical product label. • Choose appropriate spraying conditions so as to avoid spray drift affecting non-target flowering crops, hives, and water sources. • Choose an appropriate time to apply chemicals. • Mow flowering weeds inside the target area to reduce the damage to bees that may otherwise forage there. • Ensure that bees are not foraging in the target area before application. 	
ATTENTION! All of the above should be actioned before hives are placed on site.	
Agreement	
I hereby declare that: <ul style="list-style-type: none"> • I have answered the above questions honestly and to the best of my ability. • I am committed to the attached Action Plan and will make every reasonable effort to reduce the risk of pesticide poisoning. • I have the authority to enter into this agreement on behalf the business that I represent. 	
Farmer's signature	
Beekeeper's signature	
Date	

