

## APPLICATION FOR A PERMIT TO

# Transit Honey Bees and used Beekeeping Equipment from within Canada through New Brunswick in 2023

### AS PER SECTION 26(1) OF THE *BEE ACT*:

No person shall transit bees or used beekeeping equipment between two provinces through New Brunswick without a Transit Permit.

**This application is to be completed if honey bees or used beekeeping equipment are being transported between two provinces through New Brunswick.**

**This application is to be completed by the person who will be importing the honey bees. The permit will be issued to the importer listed in section 1.**

### SECTION 1: IMPORTER INFORMATION

The details required in this section relate to the person who will be importing the bees or used beekeeping equipment from another province.

PLEASE PRINT		
<b>IMPORTER INFORMATION</b>		
First Name:	Last name:	Company:
Address:		City:
Province:	County:	Postal code:
Telephone:	Cell phone:	Fax:
Email:		

## SECTION 2: EXPORTER INFORMATION

The details required in this section relate to the person who will be exporting the bees or used beekeeping equipment to another province

EXPORTER INFORMATION		
First Name:	Last name:	Company:
Address:		City:
Province:	County:	Postal code:
Telephone:	Cell phone:	Fax:
Email:		

## SECTION 3: TRANSIT THROUGH NEW BRUNSWICK

The details required in this section relate to the company transporting the bees or used beekeeping equipment through New Brunswick.

INFORMATION ON THE COMPANY TRANSPORTING BEES OR USED BEEKEEPING EQUIPMENT THROUGH NEW BRUNSWICK		
First Name:	Last name:	Company:
Address:		City:
Province:	County:	Postal code:
Telephone:	Cell phone:	Fax:
Email:		

**INFORMATION ON DESTINATION AND BEES/USED BEEKEEPING EQUIPMENT TRANSPORTED**

Expected date of departure:		Destination (Province):	
# Colonies:	# Nucleus colonies (nucs):	# Packaged bees:	# Queens:
# Used hive components (list):		# Used beekeeping utensils (list):	

**SECTION 4: ACKNOWLEDGEMENT**

I acknowledge that the information provided in this form is complete and accurate. I provide consent to having the information forwarded to the Provincial Apiarist and the beekeeper in the exporting province.

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**DATE (DD/MM/YY)**

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**NAME****FOR MORE INFORMATION CONTACT:**

**Chris Maund, Provincial Apiarist**  
**chris.maund@gnb.ca**  
Telephone: (506) 453-3477

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