Department of Agriculture and Fisheries

Registrable biosecurity entity (RBE) application

Bees

Pursuant to ***Chapter 7*** of the ***Biosecurity Act 2014***

OFFICE USE ONLY

BY COUNTER STAFF – PAYMENT DETAILS
DATE APPLICATION RECEIVED:
FEE PAYABLE: ☐ Payable ☐ Exempt If payable Fee due: $
FINANCIAL OFFICER PROCESSING PAYMENT:
PAYMENT AMOUNT RECEIVED AND RECEIPTED IN SAP:
PAYMENTMETHOD:(credit/debit card, cash, cheque, money order)
DATE RECEIPTED IN SAP:
SAP RECEIPT NUMBER:
RECEIPT REQUIRED: ☐ Yes ☐ No If Yes - ☐ by email ☐ by post
BY APPLICATION PROCESSING OFFICER
PROCESSING OFFICER:
RBE NUMBER:
HIN:
FURTHER INFORMATION REQUEST DATE:
DATE FURTHER INFORMATION RECEIVED:

Why you need to complete this form

A person, partnership, company or other entity that owns or keeps one (1) or more bee hives in Queensland, must apply to the Department of Agriculture and Fisheries to register as a biosecurity entity.

How to complete this form

- You must complete all parts in this application (A, B, C, D, E & F).

How to submit this form

- In person to:
  Any Department of Agriculture and Fisheries regional office not all offices can accept payment); or
- Via post to: RBE Processing
  Department of Agriculture and Fisheries
  PO Box 1329
  Toowoomba Qld 4350

Prescribed fee

- A fee is payable if you keep bees as a commercial primary producer (i.e. you claim primary producer status on your tax return).
- A fee is NOT payable if you keep bees only for non-commercial purposes (you are exempt from the fee).
- For the current fee visit www.daf.qld.gov.au/biosecurity-fees
- The prescribed fee must be paid on submission of the application.
- Payment cannot be accepted by email.
- Fees are applicable until the end of the financial year.

Term of registration

The term of the RBE registration is for three (3) years from the date your application is approved unless the registration is cancelled or suspended.

Notification

- The applicant will be notified of the outcome within 10 working days after submitting the application, provided all required information has been received.
- The applicant will be notified by email if an email address has been provided otherwise by post.

Contact us

For more information please contact apiary@daf.qld.gov.au or the Department of Agriculture and Fisheries Customer Service Centre on 13 25 23.

Part A - Applicant details

The applicant is the person/s or entity who owns the hives.

1. Applicant type: *(þ one box only)*

Complete section 2, if	○ Private individual/s
Complete section 3, if	○ Company ○ Trust ○ Registered body ○ Government organisation

2. Private individual/s

All individuals to be registered must include their details. If there are more than two individuals, attach supplementary pages and provide the same information as below for each additional individual.

	Applicant 1	**Applicant 2**
	Provide all given names in full – no initials	***Provide all given names in full – no initials***
Given name/s (all)		
Surname		
Preferred name		
		Only complete if different from applicant 1
Have you previously registered?	○ No ○ Yes Indicate previous brand or HIN: _____	○ No ○ Yes Indicate previous brand or HIN: _____
	Must be a road or street name – cannot be a PO Box	***Only complete residential address for applicant 2 if different from applicant 1***
Residential address		
Locality/suburb		
State	Postcode	Postcode
Country		
Do you want this address to be used as the contact address for the RBE?	○ No ○ Yes	○ No ○ Yes
	Only complete if different from residential address	***Only complete postal address for applicant 2 if different from applicant 1***
Postal address		
Locality/suburb		
State	Postcode	Postcode
Country		
Do you want this address to be used as the contact address for the RBE?	○ No ○ Yes	○ No ○ Yes

	Provide at least one phone number other than fax, please provide email ***Only complete if different from applicant 1***
Phone	
Mobile	
Fax	
Email	

3. Company, trust, registered body or government organisation

If applicant is a company, trust, registered body or government organisation (i.e. not private individual or partnership) please complete the following section.

	Company, trust, registered body or government organisation
Organisation name	

Postal address					
Locality/suburb					
State		Postcode		Country	

Only complete residential address if different from postal address - must have a road or street number and name – cannot be a PO Box

Residential address					
Locality/suburb					
State		Postcode		Country	

Details of organisation contact person must be provided – Provide all given names in full – no initials

Given names	
Surname	
Preferred name	

Provide at least one phone number other than fax

Phone		Fax	
Mobile		Email	

4. Additional details for the registrable biosecurity entity

Only complete if required.

Trading name		ABN	

Part B - Beekeeper details

Number of hives	

Tick all that apply

Operation type	☐ Hobbyist	☐ Honey producer	☐ Queen bee breeder	☐ Equipment supplier
	☐ Pollination	☐ Packer	☐ Research	

Part C - Apiary site details

List the locations of all your apiary sites, whether currently in use or not. Beekeepers are advised to brand all hives as proof of ownership and to assist recovery in the event of loss or theft. Upon registration, a unique registered brand or Hive Identification Number (HIN) will be issued. Attach a separate page if required.

Apiary site owner's name	Apiary site address *Please provide road/street address*	Locality/suburb	Postcode

Part D - Origin of hives

Please indicate where hives were obtained from.

	Private individual/s	Company, trust, registered body, government organisation
Organisation		
	Provide all given names in full – no initials	*Provide details of organisation contact person* *Provide all given names in full – no initials*
Given name/s		
Surname		
Preferred name		

Must be a road/street name not a PO box

Location where hives were collected					
Locality/suburb		State		Postcode	

Provide at least one phone number other than fax

Phone		Fax	
Mobile		Email	

If applicable, provide details of any brand showing on the hives

Previous brands on the hives	

Part E - Applicant declaration

1. **Privacy statement**

   The Department of Agriculture and Fisheries is collecting the information on this form and any attachment as a requirement under ***Chapter 7*** of the ***Biosecurity Act 2014*** for the registration of biosecurity entities, to maintain the register of registrable biosecurity entities. In addition, some information may be given to other government agencies to assist in the management of diseases, pests, residues. Your information will not be disclosed to any other parties unless authorised or required by law.

2. **Applicant declaration**

   The particulars provided in this application and any information associated with this application are true and correct to the best of my knowledge and I have taken reasonable steps to ensure their accuracy and completeness.

   You must sign this application before submitting it, otherwise it will be returned to you.

Full name	Signature	Date

Part F - Payment options

Please note: Your payment must be accompanied with your application if a fee is applicable.

Applicable fee

A fee is payable if you keep bees as a commercial primary producer (i.e. you claim primary producer status on your tax return).

A fee is NOT payable if you keep bees only for non-commercial purposes (you are exempt from the fee).

Are you already registered?

- ○ Yes à No fee applicable
- ○ No à Are you a commercial primary producer in relation to this application?
  - ○ Yes — Applicable fee. For the current fee visit www.daf.qld.gov.au/biosecurity-fees
  - ○ No — No fee applicable

Part F - Payment options (if applicable)

Payable fee

Please refer to fees associated with this form at www.daf.qld.gov.au/biosecurity-fees

A fee is payable only if you are registering for the first time and are a commercial primary producer (i.e. you claim commercial primary producer on your tax return).

If a fee is applicable, your payment must be accompanied with your application. Select **ONE** payment option only.

☐ **Cash**
Pay by cash at a Department of Agriculture and Fisheries regional office (not all offices accept cash payments).

☐ **Cheque or Money Order**
Please mark as 'not negotiable' and payable to 'Department of Agriculture and Fisheries'.

☐ **Debit Card or Credit Card**
You will be contacted to make payment via our secure payment line.
**A contact phone number is required: _____.

Further instructions and advice

For more information please contact rbe@daf.qld.gov.au or the Department of Agriculture and Fisheries Customer Service Centre on 13 25 23.