

Hive Inspection Sheet

This form is meant to be used as a guide for what to observe and document while working your hive(s). Please create or use whatever recording method which best suits your

Date _____
 Weather Condition _____
 Hive ID _____

ENTRANCE OBSERVATION	Bees/Min	% Carrying		Dead Bees at Entrance?
		Pollen	Fighting?	

HIVE TEMPERAMENT

Calm	Nervous	Aggressive	Other

QUEEN LOCATED

Yes	No	Date Queen replaced

LAYING PATTERN

Solid & Uniform	
Intermittent or random	
Spotty	

EGGS PRESENT

Yes	No	Comment

POPULATION

Heavy	Moderate	Low
Added super		
Split Hive		New Hive ID
Swarm Signs		

EXCESSIVE DRONE CELLS

No		Yes	
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Drone Population Estimate:

Low:30	Avg: 30-99	High: 100+

QUEEN CELLS

No		Yes	
Swarm			
Supersedure			

DISEASE/PESTS

No		Yes	
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What was observed: _____

HIVE MANAGEMENT TASKS

Reversed boxes	
Cleaned bottom board	
Added sugar syrup	
Added super	
Honey removed	
# frames	
Replace foundation	

HIVE CONDITION

Normal	
Brace comb	
Burr comb	
Excessive Propolis	
Normal odor	
Foul odor	
Comb condition	
Frames of Honey	
Frames of Bees	

OBSERVATIONS:

INTEGRATED PEST MANAGEMENT:

Screened Bottom Board observation: _____

Other: _____
