

# Hive Inspection Sheet

Hive ID \_\_\_\_\_ Date: \_\_\_\_\_ Who worked hive: \_\_\_\_\_

<p><b>Hive Temperament</b>  <input type="checkbox"/> Calm      <input type="checkbox"/> Nervous      <input type="checkbox"/> Aggressive</p> <p><b>Saw Queen</b>  <input type="checkbox"/> No    <input type="checkbox"/> Yes          (Marked? <input type="checkbox"/> No    <input type="checkbox"/> Yes - Color _____)</p> <p><b>Laying pattern</b>  <input type="checkbox"/> Beautiful (<i>Solid &amp; Uniform</i>)  <input type="checkbox"/> Mediocre (<i>Little spotty</i>)  <input type="checkbox"/> Poor (<i>Spotty</i>)</p> <p><b>Eggs seen</b>  <input type="checkbox"/> No    <input type="checkbox"/> Yes          Comments: _____          _____</p> <p><b>Population</b>  <input type="checkbox"/> Heavy    <input type="checkbox"/> Moderate    <input type="checkbox"/> Low</p> <p><b>Excessive drone cells</b>  <input type="checkbox"/> No    <input type="checkbox"/> Yes          Drone Population Estimate:  <input type="checkbox"/> <b>Low:</b> 30&lt;    <input type="checkbox"/> <b>Ave.:</b> 30 to 100    <input type="checkbox"/> <b>High:</b> 100+</p> <p><b>Queen cells</b>  <input type="checkbox"/> No    <input type="checkbox"/> Yes          Along frame bottom: # _____          Converted worker cell: # _____</p> <p><b>Disease/Pests</b>  <input type="checkbox"/> No    <input type="checkbox"/> Yes  <input type="checkbox"/> CB    <input type="checkbox"/> Nosema    <input type="checkbox"/> Varroa    <input type="checkbox"/> EFB    <input type="checkbox"/> AFB  <input type="checkbox"/> Wax Moth          Other: _____</p>	<p><b>Food Stores</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Honey</th> <th style="width: 20%; text-align: center;">Pollen</th> </tr> </thead> <tbody> <tr> <td>High (Everywhere)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Average</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Low</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Near brood</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p><b>Hive Condition</b>  <input type="checkbox"/> Normal      <input type="checkbox"/> Brace comb      <input type="checkbox"/> Excessive Propolis  <input type="checkbox"/> Normal odor    <input type="checkbox"/> Foul odor      <input type="checkbox"/> Equip. Damage          Other: _____</p> <p><b>Actions taken:</b>  <input type="checkbox"/> Fed hive    <input type="checkbox"/> Added super(s) #  <input type="checkbox"/> Split hive (<i>new hive #</i> _____)  <input type="checkbox"/> Added Excluder    <input type="checkbox"/> Requeened    <input type="checkbox"/> Added Feeder  <input type="checkbox"/> Swapped brood boxes          Other: _____</p> <p><b>Medications</b></p> <p><b>Added</b></p> <p><input type="checkbox"/> Bavoral    <input type="checkbox"/> Thymol    <input type="checkbox"/> Oxalix Acid  <input type="checkbox"/> Other: _____</p> <p><b>Removed</b></p> <p><input type="checkbox"/> Bavoral  <input type="checkbox"/> Other: _____</p> <p><b>Recommendations:</b>  <input type="checkbox"/> Add supers    <input type="checkbox"/> Split    <input type="checkbox"/> Replace Queen  <input type="checkbox"/> Swarming imminent – needs monitoring  <input type="checkbox"/> Replace Equipment -<i>What:</i> _____          Other: _____</p>		Honey	Pollen	High (Everywhere)	<input type="checkbox"/>	<input type="checkbox"/>	Average	<input type="checkbox"/>	<input type="checkbox"/>	Low	<input type="checkbox"/>	<input type="checkbox"/>	Near brood	<input type="checkbox"/>	<input type="checkbox"/>
	Honey	Pollen														
High (Everywhere)	<input type="checkbox"/>	<input type="checkbox"/>														
Average	<input type="checkbox"/>	<input type="checkbox"/>														
Low	<input type="checkbox"/>	<input type="checkbox"/>														
Near brood	<input type="checkbox"/>	<input type="checkbox"/>														
<p><b>Interesting Observations:</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>																