Counties of Inyo-Mono

GEORGE L. MILOVICH
AGRICULTURAL COMMISSIONER
DIRECTOR OF WEIGHTS AND MEASURES

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Apiary Complaint Form

PLEASE PRINT

Name: _____ Date: _____

Address: _____

City: _____ Zip: _____

Phone number where you may be reached between 8AM – 5PM, Mon. – Fri.: _____

Please describe the complaint in detail: _____