

Molluscan Bivalve Shellfish Only

AQUATIC FARMER LICENSE APPLICATION I [2021]

This application serves as the OPERATIONAL PLAN for the NJDEP, Bureau of Marine Water Monitoring Commercial Shellfish Aquaculture Permit (N.J.A.C. 7:12-9.15) and Hatchery/Nursery Permit (N.J.A.C. 7:12-9.14).



ALL molluscan bivalve shellfish culturists within the State of New Jersey, including hatchery and nursery operators must complete the appropriate application pages as follows:

1. Grow-out operations (lease/riparian)- complete pages 2-6; sign page 9.
2. Hatchery operators- complete page 2 and page 7; sign page 9.
3. Nursery operators- complete page 2 and page 8; sign page 9.
4. Use one application for a nursery/hatchery and grow-out within the same company/applicant.
5. An application is only considered **complete when all questions within the applicable pages are answered and the final page is signed by the applicant.**

If you do NOT produce molluscan bivalve shellfish, use Application II.

DATE: _____

Applicant Information

Name:				Date of Birth:			
Mailing Address:							
City:			State:			Zip code:	
Telephone			Email:				
Business Name							
Facility Street Address:							
Municipality:				County:			
Block No.				Lot No.			

***(if different than applicant)*

Name of Consultant or Alternate Contact Person:							
Address:							
City:			State:			Zip code:	
Telephone			Email				

Permits

Provide information on permitting for your shellfish aquaculture farm.

Permitting Authority	Permit/License Name	Permit/License Number
NJDEP, BSF	Commercial Shellfish License	
NJDEP, BSF	Shellfish Lease	(see page 3)
USACE	Nationwide#48/Individual Permit	
NJDEP, DLUR	Coastal Zone Permits	
TIDELANDS	Tidelands License/Riparian Grant	
NJDEP, BMWM	Commercial Shellfish Aquaculture Permit	
NJDEP, BMWM	Hatchery /Nursery Permit	
NJDOH	Certified Dealer	
NJDOH	Wet Storage	
NJDA	Aquatic Farmer License	
NJDEP, BSF	Shellfish Seed Import (Approval Memo)	<input type="checkbox"/> Yes <input type="checkbox"/> No

NJDEP= New Jersey Department of Environmental Protection
 BSF= Bureau of Shellfisheries
 DLUR= Division of Land Use Regulation

BMWM= Bureau of Marine Water Monitoring
 USACE= US Army Corps of Engineers
 NJDOH= New Jersey Department of Health
 NJDA= New Jersey Department of Agriculture

I. General Activity Description

1. Which of the following characterizes your commercial shellfish aquaculture location?

**Select ALL that apply.*

- Shellfish Lease
 Riparian Grant
 Upland Facility

2. Identify all Shellfish Lease and/or Riparian Grant Locations where aquaculture activities will be conducted. **Attach a list of additional lots, if needed.*

Lease Lot or Riparian Owner	Lease Lot Number (Block & Lot for Riparian Grounds)	Lease Lot Section	Estuary/Waterbody

3. A **map of your shellfish aquaculture farm** must be included with this application. On the map note site boundaries including GPS coordinates and the locations of any structures, including cages, floats, raceways, or tanks.

4. Which best describes your shellfish system? *Select ALL that apply.*

- Bottom Culture (no gear/structure)
 Cage Culture
 Rack Culture
 Tray Culture
 Floating Bags
 Floating Cages
 Spat Collectors
 FLUPSY
 Other: _____

5. What species are you growing? *Select ALL that apply.*

- Eastern Oyster
 Hard Clam
 Blue Mussel
 Bay Scallop

6. Identify your seed suppliers.

Species	Supplier Name	State	Phone Number

7. Will you be **growing molluscan shellfish past seed size at an approved UPLAND facility?**

This includes growing molluscan shellfish in a **polyculture** (the growing of 2 or more species) system in an upland facility. This is ONLY for an upland facility that will grow bivalve shellfish to market size. (See N.J.A.C. 7:12-1.2 for seed size limitations)

- Yes*
 No

**IF YES, you MUST contact the NJDEP, BMWM at 609-748-2000 for additional permitting requirements.*

II. Husbandry

8. Do you perform maintenance & husbandry **on your lease/riparian?**

Yes

No

9. Do you perform maintenance & husbandry **off-site from your lease/riparian?**

Yes

No

10a. Describe your **Maintenance and Husbandry** activities.

(culling, sorting, washing)

10b. If using **FLOATING** Gear, describe **bird deterrent** methods &/or equipment.

III. Harvest

11. Is your harvest **tide-dependent?**

Yes

No

12. If YES, at what point in the tide cycle do you harvest (low, mid, high)?

13. Describe your **Harvest Activity.**

(raking, bags onto ATV, cages onto boat)

IV. Post-Harvest Handling

14. Approximately how many hours does it take to get your product to a Certified Dealer after harvest? _____ hours

15. Are you a Certified Dealer?

- Yes* No

****If YES, you must provide a copy of the shellfish certificate issued by the Department of Health pursuant to N.J.A.C. 8:13-1.5.***

16. Are you utilizing wet storage? (*Wet storage is the storage of shellfish from other shellfish growing waters, in a natural or synthetic seawater, to condition, remove sand, or add salt to the shellfish.*)

- Yes No

17. Describe your **Post-Harvest Handling** and **Transport to Certified Dealer.**

(*refrigerated truck; icing, shading*)

V. Production

18. Provide an estimate of **Hatchery &/or Nursery Production** for each species you cultivated in the previous year.

Species	Hatchery Production	Nursery Production
Eastern Oyster		
Hard Clam		
Surf Clam		
Blue Mussel		
Bay Scallop		

19. Will your operation *ONLY* produce molluscan bivalve shellfish?

- Yes
 No*

****If you are growing organisms in addition to molluscan bivalve shellfish, contact the NJDA, Office of Aquaculture Coordination at 609-292-5532.***

20. Monthly Production

The National Shellfish Sanitation Program 2019 Guide for the Control of Molluscan Shellfish requires the collection of monthly harvest data.

Provide MONTHLY estimates of harvest for the previous calendar year.

Enter the species common name at the top of the column and enter monthly data below each species, accordingly.

MONTH		SPECIES 2	SPECIES 3
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
TOTAL			

[End Grow Out Questions (sign page 9); Pages 7&8, Hatchery & Nursery ONLY.]

VI. Hatchery

****This page MUST be completed if you operate a Hatchery:** A *Hatchery* is a facility that produces molluscan bivalve seed from broodstock and may grow the seed until movement to approved waters for grow-out (via sale or movement to approved shellfish grounds), provided the seed never grows to a size larger than defined at N.J.A.C. 7:12-1.2.

1. Provide the **water source** for your facility and the **water classification** for that source (according to the most recent Shellfish Growing Water Classification Chart).

Water Source	Water Classification (per BMWW www.nj.gov/dep/bmw)

2. Provide the **number of broodstock** maintained at the hatchery for each species produced.

Species	Number of Broodstock

3. **Where** are the broodstock kept within the hatchery?

4. **When** are broodstock within the hatchery (provide best estimate dates or months)?

5. What **security measures** are used to ensure safety of the broodstock within the hatchery?

VII. Nursery

****This page MUST be completed if you operate a Nursery:** A *Nursery* can only be used for the grow-out of seed and cannot contain any shellfish above the seed sizes defined at N.J.A.C. 7:12-1.2.

6. Provide the **water source** for your facility and the **water classification** for that source (according to the most recent Shellfish Growing Water Classification Chart).

Water Source	Water Classification (per BMWM www.nj.gov/dep/bmw)

7. Is the nursery in-water?

Yes No

If YES, provide coordinates: _____

8. Is the nursery on land?

Yes No

If YES, provide address: _____

9. Does the nursery utilize **upwellers**- including FLUPSY systems?

Yes No

**IF YES:*

a. How many upwellers are present: _____

b. Where are they located: _____

10. Does the nursery utilize **downwellers**?

Yes No

**IF YES:*

a. How many downwellers are present: _____

b. Where are they located: _____

11. Does the nursery utilize **raceways**?

Yes No

**IF YES:*

a. How many raceways are present: _____

b. Where are they located: _____

12. What other items are present at the nursery facility for the growth of shellfish?

ACKNOWLEDGMENT

This document is the *formal application* for an Aquatic Farmer License from the New Jersey Department of Agriculture. As of September 19, 2016, the Aquatic Farmer License additionally serves as the Operational Plan for the NJDEP Commercial Shellfish Aquaculture Permit and the Hatchery/Nursery Permit. Depending on the size, nature, and location of the proposed aquaculture operation, additional permits beyond those listed in this application may be required by local, state, and/or federal regulatory agencies.

This Application will identify additional permits and will allow the NJDA to provide assistance in obtaining those permits. I understand that individual permits required by other regulatory authorities may require separate applications.

By signing below, I understand the benefits and requirements of the Aquatic Farmer License and I agree to cooperate with the New Jersey Department of Agriculture in the development of appropriate production information and other data to ensure the growth and well-being of the New Jersey aquaculture industry.

(Date)

Applicant's Signature

Applicant's Name (Print)