



Delaware Department of Natural Resources and Environmental Control
Division of Fish and Wildlife

Delaware Inland Bays Shellfish Aquaculture Nursery Operation Application

***PLEASE CONTACT DNREC, DIVISION OF FISH AND WILDLIFE AT (302) 735-2960 WITH QUESTIONS.**

INSTRUCTIONS: Please print or type. Send completed application to: Delaware Division of Fish and Wildlife, Fisheries Section, 89 Kings Highway, Dover, DE 19901, ATTN: Shellfish Aquaculture Permits

PRIMARY APPLICANT INFORMATION

Primary Applicant Name:				
Street Address:				
City:		State:		ZIP Code:
Mailing Address:				
City:		State:		ZIP Code:
Telephone No.:		Email:		

CO-APPLICANT INFORMATION

Co-Applicant 1 Name:				
Street Address:				
City:		State:		ZIP Code:
Mailing Address:				
City:		State:		ZIP Code:
Telephone No.:		Email:		

Co-Applicant 2 Name:				
Street Address:				
City:		State:		ZIP Code:
Mailing Address:				
City:		State:		ZIP Code:
Telephone No.:		Email:		

Co-Applicant 3 Name:				
Street Address:				
City:		State:		ZIP Code:
Mailing Address:				
City:		State:		ZIP Code:
Telephone No.:		Email:		

NURSERY AREA REQUESTED

Physical Address(if available) and Lat/Long Coordinates (specify units)	Waterbody

CURRENT LEASES (IF ANY) HELD BY ANY APPLICANT OR CO-APPLICANT

Acre ID (e.g., RB-A_A1)	Bay	Acre ID (e.g., RB-A_A1)	Bay



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SPECIES TO BE CULTURED

Species (Common and Latin name) and seed type (diploid/triploid)

Eastern Oyster (<i>Crassostrea virginica</i>)		Hard Clam (<i>Mercenaria mercenaria</i>)	
Diploid (2N) se	Triploid (3N)	Other (explain)	
Quantity of shellfish to be cultured:			
Intended use of the shellfish (for sale as seed, use on lease, etc):			
Estimate of length of time shellfish will be in nursery			

OPERATIONS PLAN

A operations plan must be submitted with this application and contain the following elements:

- A complete and accurate description of the location and size of the proposed shellfish nursery structures and area.
- A complete and accurate description of the method and manner of management or cultivation to be performed within the proposed shellfish nursery structures.

The culture of hare clams is restricted to the Little Assawoman Bay and its tidal tributaries.

ACKNOWLEDGEMENTS

Shellfish must be removed from nurseries before oysters exceed 25mm shell length and before clams exceed 15mm shell length.

I SOLEMNLY AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE INFORMATION PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE.

Primary Applicant Signature:	Date:
Printed Name of Primary Applicant:	
Co-Applicant Signature:	Date:
Print Co- Applicant Name:	
Co-Applicant Signature:	Date:
Print Co- Applicant Name:	
Co-Applicant Signature:	Date:
Print Co- Applicant Name:	

ALL CO-APPLICANTS MUST SIGN THIS FORM BEFORE IT WILL BE PROCESSED



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Department Use Only

Nursery
Permit:

Approved

Denied

Effective Dates: _____ to _____

Comments/Conditions: _____

Signature
Approving Person: _____ Date: _____

Print Name: _____ Title: _____