EXPERIMENTAL LEASE APPLICATION APP 2

Devil's Apron Sea Farms Applicant Shawn Thomas Contact Person P.O. Box 194 Address Port Clyde City ME. 04855 State, Zip Knox County 207-542-2085 Telephone Sthomas815@icloud.com Email Payment Type \Box Check (included) \boxtimes Credit Card

1. APPLICANT CONTACT INFORMATION

2. PROPOSED LEASE SITE INFORMATION

Location of Proposed Lease Site		
Town	Saint George	
Waterbody	St. George River	
General Description (e.g. south of B Island)	East of Caldwell Island	
	Lease Information	
Total acreage (4-acre maximum) and lease term (3-year maximum) requested	3.90 acres 3 years	
Type of culture (check all that apply)	 Bottom (no gear) Suspended (gear in the water and/or on the bottom) Net Pen (finfish) 	
How many pending experimental lease applications (including this one) do you have pending?	\Box One (1) \boxtimes Two (2)	
Do you have a legal interest in any entity that has a pending experimental application?	☐ Yes ⊠ No If " Yes " provide the name of the applicant(s):NA	

3. GROWING AREA DESIGNATION

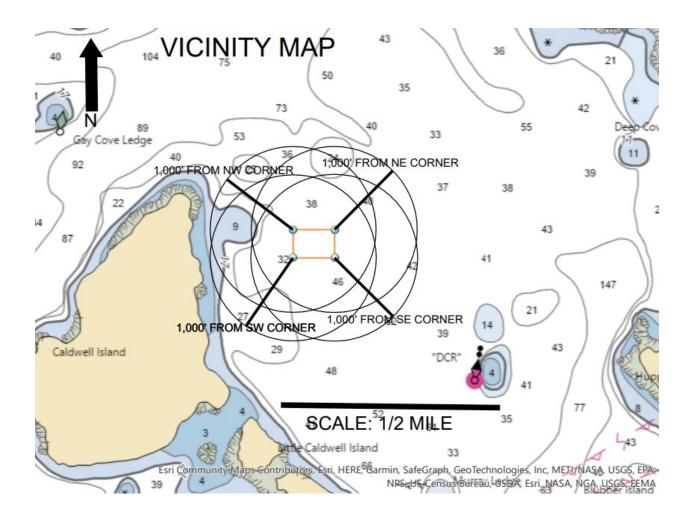
Growing Area Designation:	WU
Growing Area Section:	A1

4. GENERAL LEASE INFORMATION

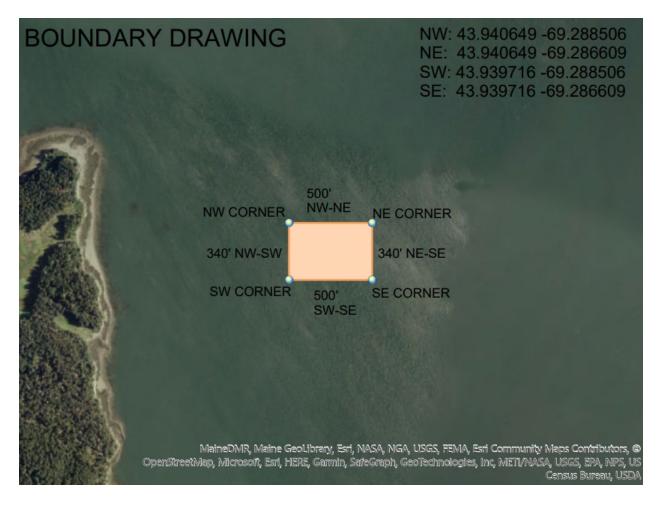
A. Please complete the table below and add additional rows as needed.

Name of species to be cultivated (include both common and scientific names):	Name and address of the source of seed stock or juveniles	Maximum number (or biomass) of organisms you anticipate on the site at any given time		
 Sugar kelp (Saccharinia latissima) 	Summit Point LLC 116 Dartmouth Street Portland, ME. 04106	6,900 linear feet		
angustissima)	Summit Point LLC 116 Dartmouth Street Portland, ME. 04106	6,900 linear feet		
3.				
4.				
5.				
B . Do you intend to possess, transport, or sell whole or roe-on scallops? \Box Yes \boxtimes No				

5. VICINITY MAP



6. BOUNDARY DRAWING



- <u>Coordinate Description</u>
- NW: 43.940649 N -69.288506 W
- NE: 43.940649 N -69.286609 W
- SW: 43.939716 N -69.288506 W
- SE: 43.939716 N -69.286609 W

7. RESEARCH PROGRAM AND OPERATIONS

-FOR THE GROWTH OF SUGAR KELP ((Saccharinia latissima) AND SKINNY KELP (Saccharina angustissima)

A. Type of study (check one): Scientific Research Commercial Research

B. What is the purpose of the study? If scientific, please include a detailed study design.

To determine the viability of growing kelp for commercial purposes in this area.

C. Describe the general culture process for each species proposed.

Seed will be obtained from Summit Point LLC hatchery and planted on long lines in the fall (No sooner than October 15th). Throughout the fall, winter, and spring the kelp's growth will be monitored. The kelp will be harvest in the spring (No later than May 31st).

D. What months will the proposed activities (i.e. seeding, tending, and harvesting) occur? Seeding will take place in the fall, no earlier than October 15th.

Tending or monitoring will occur in the fall, winter, and spring.

Harvest will occur in the spring, no later than May 31st.

E. How often will you be at the site during seeding and harvesting periods?

Seeding will begin no sooner than October 15th and could run through January 1st depending on availability of seed from the hatchery. Seeding typically takes no more than a week total for a site of this size. During the seeding it is expected that, depending on weather, the process could take up to seven days per week. Seeding will only be performed during daylight hours and up to approximately eight hours per day.

F. How frequently will you visit/tend the site for routine maintenance (i.e. flipping cages, etc.)?

The site will be visited on a weekly basis throughout the fall, winter, and spring depending on weather conditions. The site could be visited for up to approximately eight hours per day during daylight hours only.

G. Describe the harvesting techniques you will use. If you plan on using a drag, please provide the dimensions.

The kelp long lines will be hauled out of the water using a lobster boat hauler. The kelp will be cut from the long lines by hand and transported to shore, by boat, in bags or bins.

H. Describe any overwintering or "off season" plans for the site. For example, will you remove gear from the site and/or deploy gear in different areas within the proposed site? Please include where gear or product will be located if moved from the site.

All gear (excluding moorings, mooring lines, and mooring balls) will be removed from the site from June 1st-October 14th.

All gear removed from the site during the summer months will be stored on land at Shawn Thomas's personal residence.

I. What type of machinery (e.g. generator, drag, grading equipment, etc.) will you be using on the site? When and how often will the machinery be used?

-During seeding: A lobster boat and skiff may be used up to seven days a week, during daylight hours only, until seeding is completed.

-During tending: A lobster boat and skiff may be used up to seven days a week, during daylight hours only, to maintain and tend the site.

-During harvest: A lobster boat and skiff may be used up to seven days a week, during daylight hours only, until the harvest is completed.

The lobster boat will utilize a hydraulic pot hauler to haul in the kelp lines during harvest, and occasionally during maintenance and tending.

J. Please provide details on any predator control techniques you plan to employ.

No predator control is necessary at this site.

K. Suspended culture gear can attract birds that roost on the gear and defecate, potentially creating a pollution source impacting shellfish held within the gear. In order to comply with the National Shellfish Sanitation Program (NSSP) Model Ordinance (MO), DMR is requiring that applications for the suspended culture of shellfish include a description of mitigation or deterrent measures to minimize the potential pollution impacts of birds at the proposed site. If appropriate, include sketches or photos that clearly depict those measures put into practice.

Examples may include:

- Submerging suspended gear and associated product at a depth sufficient to deter roosting for two weeks before harvest
- Attaching physical deterrents (i.e. zip ties) to gear
- The site is proposed for the culture of seed only
- The site is proposed for the culture of adductor-only scallops (i.e. no other shellfish species would be grown on the site)
- Proposed gear would always be suspended below the surface of the water at a depth sufficient to deter roosting (i.e. as is common for scallop lantern nets)

NA

8. EXISTING USES

A. Describe the existing uses of the proposed area in questions A.1 through A.5 below. Please include the a) type b) time of year c) frequency, and d) proximity to the lease site for each existing use.
1. Commercial Fishing
a. Lobstering
b. June-October
c. Minimal
d. Within
2. Recreational Fishing
a. NA
b. NA
c. NA
d. NA
3 . Boating Activities (please also include the distance to any navigable channel(s) from
your proposed site at low water)
a. Recreational boating
b. June-October
c. Minimal
d. Within
The nearest navigational marker is approximately 2,200' SE of the proposed site. The primary
St. Georges River channel passes well to the East of the proposed site.
4. Ingress and egress (i.e. coming and going) of shorefront property owners within 1,000 feet of the proposal (e.g. docks, moorings, landing boats on shore, etc.)
a. NA
b. NA
c. NA
d. NA
There are no shorefront property owners within 1,000' of the proposal.
5. Other uses (kayaking, swimming, etc.)
a. Kayaking
b. June-October
c. Minimal
d. Within

B. Are there private docks, moorings, or other access points within 1,000 feet of the proposed lease? If yes, please include approximate distance from proposed lease.

NA

C. Are there public beaches, parks, or docking facilities within 1,000 feet of the proposed lease site. If yes, please describe and include approximate distances from proposed lease.

NA

D. Are there any Limited Purpose Aquaculture (LPA) licenses or aquaculture leases within 1,000 feet of your proposed lease site? If yes, please list their acronyms below.

Current and pending aquaculture leases and active LPA licenses may be found here: <u>https://www.maine.gov/dmr/aquaculture/leases/index.html</u>

1.(Experimental lease application under review for "Miss Madisyn") 615' SW of the SW Corner of the proposed site

2.(Experimental lease application under review for "Albatross Fisheries") 815' SW of the SW Corner of the proposed site

9. CURRENT OPERATIONS

A. Describe your existing aquaculture operations, including the acronyms of all active leases and/or licenses.

NA

B. What are your plans for any existing leases and/or Limited Purposed Aquaculture (LPA) licenses if the lease is granted? Will any existing leases and/or Limited Purpose Aquaculture (LPA) licenses be relinquished if the lease is granted? If so, please indicate which ones.

NA

10. ENVIRONMENTAL CHARACTERIZATION

A. What are the approximate depths at mean low water?

The depths at approximate mean low water range from 32' on the West side of the proposed site to 40' on the East side of the proposed site.

B. What are the approximate depths at mean high water?

The depths at approximate mean high water range from 42' on the West side of the proposed site to 50' on the East side of the proposed site.

C. Provide the approximate current speed and direction during the ebb and flow.

The approximate current speed is 1.5 knots and runs in roughly a NW-SE direction.

D. The following questions (D.1 through D.6) may be answered in writing or by submitting a video. If you plan to submit a video, please contact the Department prior to video collection.

1. What are the bottom characteristics (mud, sand, gravel, rock, ledge or some mix, etc.)?

The bottom characteristics are soft mud.

2. Describe the bottom topography (flat, steep rough, etc.).

The proposed site is mostly flat with a gradual slope from about 32' on the West side at MLW to 40' on the East side at MLW.

3. Describe marine organisms by species or common names. Based on your personal observations or other sources of information, are these species abundant, common, or rare?

Lobsters and crabs are common on the site.

4. Are there shellfish beds or fish migration routes in the surrounding area? If so, please describe.

There are no shellfish beds of fish migration routes in the surrounding area.

5. Describe the presence and extent of submerged aquatic vegetation, i.e. eelgrass, within the proposed lease area. Please include the date of this observation along with the method of observation. If submerged aquatic vegetation is observed, please also describe the abundance below and sketch the limits of the beds in the vicinity map.

There is no submerged aquatic vegetation or eelgrass within the proposed lease area.

6. Describe the general shoreline and upland characteristics (rocky shoreline, forested, residential, etc.)

The nearest shoreline is rocky and forested. There are two residential homes on Caldwell Island.

E. Is your proposed lease located within a Maine Department of Inland Fisheries and Wildlife designated Essential Habitat?

 \Box Yes \boxtimes No

F. Will your operations discharge anything into the water such as feed (pellets, kelp, etc.) or chemical additives (therapeutants, chemical treatments, etc.)?

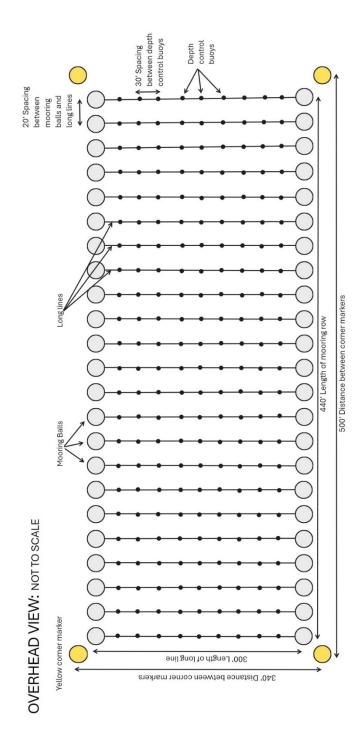
 \Box Yes \boxtimes No

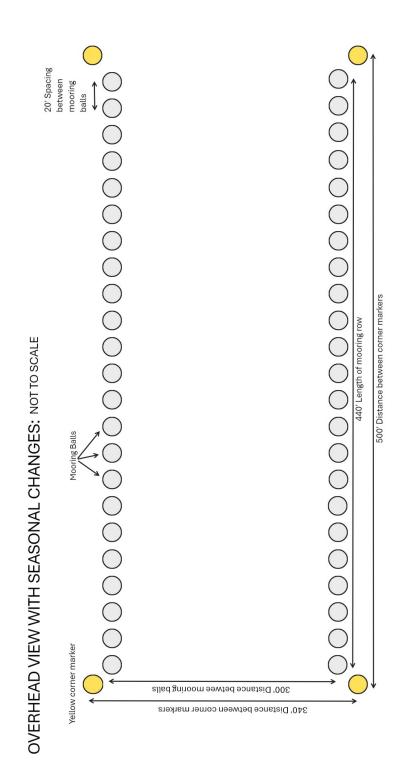
G. Describe ice formation in the winter months at the proposed site.

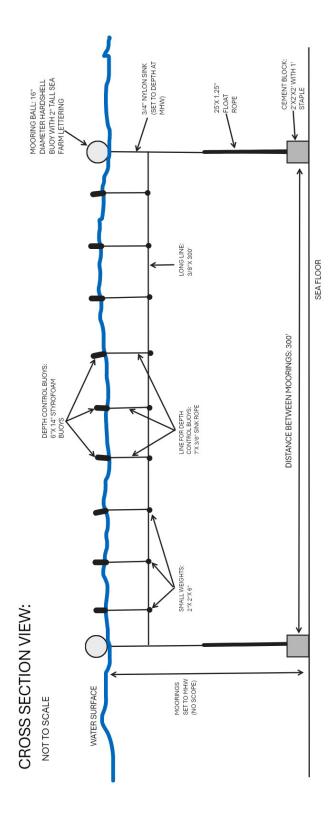
There is no ice formation at the proposed site during the winter months.

11. STRUCTURES

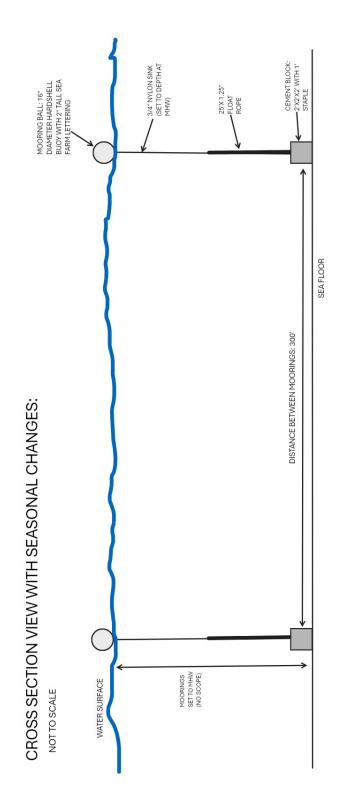
A. OVERHEAD VIEW: (October 15th- May 31st)







C. CROSS SECTION VIEW: (October 15th- May 31st)



C) Gear Description

Specific Gear Type	Dimensions	Time of year gear will be deployed	Maximum amount of this gear type that will be deployed on the site	Species that will be grown using this gear type
Styrofoam buoys (depth control buoys)	6"x 14"	Oct 15 th -May 31 st	207 buoys	Sugar kelp/Skinny kelp
Sink rope for depth control buoys	3/8" diameter 7' long	Oct 15 th -May 31 st	207 lengths	Sugar kelp/Skinny kelp
Small weight for depth control buoy	2"x 2"x 6"	Oct 15 th - May 31 st	207 weights	Sugar kelp/Skinny kelp
Long line	3/8" diameter by 300' length	Oct 15 th - May 31 st	23 lines totaling 6,900 linear feet	Sugar kelp/Skinny kelp
Mooring markers (hard-shell variety)	16" diameter	Year-round	46 buoys	Sugar kelp/Skinny kelp
Mooring line	25' x 1.25" float from the blockthen ³ /4" sink to the mooring marker. (set to MHW)	Year-round	46 mooring lines	Sugar kelp/Skinny kelp
Mooring (cement block)	2'x 2'x 2'	Year-round	46 moorings	Sugar kelp/Skinny kelp
Mooring staple	3 links of 1" diameter chain	Year-round	46 staples	Sugar kelp/Skinny kelp

D) Gear Drawing

-GEAR DRAWING: DEPTH CONTROL BUOY (6"x 14" Styrofoam)



-GEAR DRAWING: SINK ROPE FOR DEPTH CONTROL BUOY (Cut to 7' lengths)



-GEAR DRAWING: SMALL WEIGHT



Ergo brick lobster trap weight. 4 lbs. Coated green.

-GEAR DRAWING: LONG LINE (Cut to 300' lengths)



-GEAR DRAWING: MOORING MARKER (WHITE 16" diameter) Corner markers will be yellow.



-GEAR DRAWING: MOORING LINE (¾" Sink... cut to lengths appropriate for MWH)



-GEAR DRAWING: MOORING LINE 1.25" FLOAT



-GEAR DRAWING: MOORING BLOCK (2'x 2'x 2')



-GEAR DRAWING: MOORING STAPLE (3 lengths of 1" mooring chain)



12. MARKING

Will you be able to mark your site in accordance with DMR regulations, Chapter 2.80? In part, this requires marker buoys which clearly display the lease ID and the words SEA FARM to be located at each corner of the lease. Marker buoys must be yellow and host reflective material.

 \boxtimes Yes \Box No

If you answered no, explain why and suggest alternate markings.

NA

13. RIPARIAN LANDOWNERS AND SITE ACCESS

NA. Lease is not within 1,000' of any riparian land.

A. Will your access to the lease area be across riparian land?

 \Box Yes \boxtimes No

B. How (i.e. where on shore) will you access the proposed site?

The site will be access by boat from the wharfs in Port Clyde.

RIPARIAN LANDOWNER LIST

THIS LIST MUST BE <u>CERTIFIED</u> BY THE TOWN CLERK

On this list, please include the map number, lot number, and the current owners' names and mailing addresses for all shorefront parcels within 1,000 feet of the lease site. It is the applicant's responsibility to assemble the information for the Town Clerk to certify. The Town Clerk <u>only</u> certifies that the information is correct according to the Town's records. Once you have completed the form, <u>ask the Town Clerk to complete the certification section below.</u> If riparian parcels are located within more than one municipality, provide a separate, tax map and certified riparian list for each municipality.

TOWN OF: NA

MAP #	LOT #	Landowner name(s) and address(es)
<u>NA</u>	<u>NA</u>	<u>NA</u>

Please use additional sheets if necessary and attach hereto.

CERTIFICATION

I, _____NA____, Town Clerk for the Town of _____NA___ certify that the names and addresses of the property owners listed above, as well as the map and lot numbers, are those listed in the records of this municipality and are current as of this date.

SIGNED: NA DATE: NA

14. ESCROW ACCOUNT OR PERFORMANCE BOND

Check Here	Lease Category	Amount of Required Escrow or Performance Bond
	No gear/structure, no discharge	None
	No gear/structure, discharge	\$500.00
	\leq 400 square feet of gear/structure, no discharge	\$1,500.00
	>400 square feet of gear/structure, no discharge	\$5,000.00*
	Gear/Structure, discharge	\$25,000.00

Check the category that describes your operation:

*DMR may increase the bond/escrow requirements for leases with more than 2,000 feet of structure.

I, (*printed name of applicant*) <u>Shawn Thomas: owner Devil's Apron Sea Farms</u> have read DMR Aquaculture Regulations 2.64(12)(B)) and if this proposed lease is granted by DMR I will either open an escrow account or obtain a performance bond, depending on the category of lease.

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- Owner: Devil's Apron Sea Farm $\frac{12/01/23}{Date}$

Applicant Signature Note: Add title if signing on behalf of a corporate applicant.

ADDITIONAL APPLICANTS: Each applicant must sign this section indicating that they will open an escrow account or obtain a performance bond. Use the space below for additional persons listed on the application. You may attach additional pages, if necessary.

I, (printed name of applicant)	NA	have read DMR Aquaculture
		nted by DMR I will either open an
escrow account or obtain a pe	rformance bond, depending	g on the category of lease.

NA

NA Date

Applicant Signature Note: Add title if signing on behalf of a corporate applicant.

15. APPLICANT SIGNATURE PAGE

I hereby state that the information included in this application is true and correct. I have also read and understand the requirements of the Department's rules governing aquaculture and the application instructions pertaining to the experimental lease process.

Title (if corporate applicant): ___Owner: Devil's Apron Sea Farms_____

Signature: 5L	- 11-	Date:	12	101	123	>
					/	

18 U.S.C. Section 1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals, or covers up any trick, scheme, or disguises a material fact or makes any false, fictitious or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both.

16. LANDOWNER/MUNCIPAL PERMISSION REQUIREMENTS (NA)

Step II: Determine if the municipality where your site is located has a shellfish conservation program.

NA. The proposed site is not intertidal.



Aquaculture Division, 21 State House Station, Augusta, ME 04333-0021 (207) 624-6567

CORPORATE APPLICANT FORM For Standard and Experimental Aquaculture Lease Applications

Corporations or partnerships that apply for aquaculture leases in the State of Maine must complete this form. Corporations must submit information as requested under <u>A. Corporate</u> <u>Applicant</u>. Partnerships must submit information as requested under <u>B. Partnership Applicant</u>.

A. Corporate Applicant

Note: You must attach a copy of the Articles of Incorporation (Inc.) or Certificate of Formation (LLC) to your application.

1. Name of Corporation:	Devil's Apron Sea Farm LLC		
2 Date of incorporation:	11/8/23	State of incorporation:	Maina

2. Date of incorporation: ____11/8/23 ____ State of incorporation: ____Maine ____

3. List the names, addresses, and titles of all officers:

Name	Address	Title
Shawn R. Thomas	22 Jessie's Way	Owner
	Port Clyde, ME. 04855	

Please use additional sheets if necessary and attach to the application.

4. List the names and addresses of all directors/members:

Name	Address
Shawn R. Thomas	22 Jessie's Way
	Port Clyde, ME. 04855

Please use additional sheets if necessary and attach to the application.

5. Has the corporation, or any stockholder, director, or officer applied for an aquaculture lease for Maine lands in the past? \square Yes \boxtimes No

If you selected "yes," please indicate who applied for the lease and the status of the application or lease.

6. List the names and addresses of all stockholders who own or control at least 5% of the outstanding stock and the percentage of outstanding stock currently owned or controlled by each stockholder.

Name	Address	Percentage of Owned Stock
Shawn R. Thomas	22 Jessie's Way Port Clyde, ME. 04855	100

Please use additional sheets if necessary and attach to the application.

7. List the names and addresses of stockholders, directors, or officers owning an interest, either directly or beneficially, in any other Maine aquaculture leases, as well as the quantity of acreage from existing aquaculture leases attributed to each such person based on the percentage of owned stock listed in question 6. If none, write, "None."

Name	Address	Lease Acronym	Acreage
NA	NA	NA	NA

Please use additional sheets if necessary and attach to the application.

8. Has the corporation or any officer, director, member, or shareholder listed in item 5 above ever been arrested, indicted, convicted of, or adjudicated to be responsible for any violation of any marine resources or environmental protection law, whether state or federal?



If you selected "yes", please provide details.

B. Partnership Applicant

Note: You must attach a copy of either the Certificate of Limited Partnership or documentation of the formation of a General Partnership to your application.

- 1. Name of Partnership: <u>NA</u>
- 2. Date of formation: <u>NA</u> State of partnership: <u>NA</u>

3. List the names, addresses, and ownership shares of all partners:

Name	Address	Ownership Shares
NA	NA	NA

Please use additional sheets if necessary and attach to the application.

4. Has the partnership, or any partner applied for an aquaculture lease for Maine lands in the past? \square Yes \bowtie No

If you selected "yes," please indicate who applied for the lease and the status of the application or lease.

5. List the names and addresses of any partner owning an interest, either directly or beneficially, in any other Maine aquaculture leases, as well as the quantity of acreage from existing aquaculture leases attributed to each such person, based on their ownership shares from question 3.

Address	Lease Acronym	Acreage
NA	NA	NA

Please use additional sheets if necessary and attach to the application.

6. Has the partnership or any partner been arrested, indicted or convicted of or adjudicated to be responsible for any violation or marine resources or environmental protection law, whether State or Federal?



If you selected "yes", please provide details.

ARTICLES OF FORMATION:

2	File No. 20239484DC Pages 2 Fee Paid \$ 175 DCN 2223182310035 DLLC FILED 11/10/2022	
L	IMITED LIABILITY COMPANY	
	STATE OF MAINE Julie Lityna	
CEF	A True Copy When Atlested By Signature	
Pursuant to 3	I MRSA §1531, the undersigned executes and delivers the following Certificate of Formation:	
FIRST:	The name of the limited liability company is:	
	DEVIL'S APRON SEA FARM, LLC	
	(A limited liability company name must contain the words "lianited liability company" or "limited company" or the abbreviation "L.L.C.," "L.C." or "L.C." or "L.C" or, in the case of a low-profit limited liability company, "L.S.C" or "ISC" - see 31 MRSA 1508.)	
SECOND:	Filing Date: (select one)	
	Date of this filing; or Later effective date (specified here):	
THIRD:	Designation as a low profit LLC (Check only if applicable):	
	This is a low-profit limited liability company pursuant to 31 MRSA §1611 meeting all qualifications set forth here:	
	A. The company intends to qualify as a low-profit limited liability company;	
	B. The company must at all times significantly further the accomplishment of one or more of the charitable or educational purposes within the meaning of Section 170(c)(2)(B) of the Internal Revenue Code of 1986, as it may be amended, revised or succeeded, and must list the specific charitable or educational purposes the company will further;	
	C. No significant purpose of the company is the production of income or the appreciation of property. The fact that a person produces significant income or capital appreciation is not, in the absence of other factors, conclusive evidence of a significant purpose involving the production of income or the appreciation of property; and	
	D. No purpose of the company is to accomplish one or more political or legislative purpose within the meaning of Section 170(c)(2)(D) of the Internal Revenue Code of 1986, or its successor.	
FOURTH:	Designation as a professional LLC (Check only if applicable):	
	This is a professional limited liability company* formed pursuant to 13 MRSA Chapter 22-A to provide the following professional services:	
	(Type of professional services)	
Form No. MD	LLC-6 (1 of 2)	

FIFTH: The Registered Agent is a: (select either a Commercial or Noncommercial Registered Agent) П Commercial Registered Agent CRA Public Number: ____ (Name of commercial registered agent) $\overline{\mathbf{A}}$ Noncommercial Registered Agent PATRICK J. MELLOR, ESQ. (Name of noncommercial registered agent) 10 MASONIC STREET, ROCKLAND, ME 04841 (physical location, not P.O. Box - street, city, state and zip code) P.O. BOX 248, ROCKLAND, ME 04841 (mailing address if different from above) SIXTH: Pursuant to 5 MRSA §105.2, the registered agent listed above has consented to serve as the registered agent for this limited liability company. Other matters the members determine to include are set forth in the attached Exhibit _____, and made a part hereof. SEVENTH: Dated 11/8/2 **Authorized person(s) Shawn R. Thomas (Type or print name of authorized person) (Type or print name of authorized person) (Signature of authorized person) *Examples of professional service limited liability companies are accountants, attorneys, chiropractors, dentists, registered nurses and veterinarians. (This is not an inclusive list - see 13 MRSA §723.7) **Pursuant to 31 MRSA §1676.1.A, Certificate of Formation MUST be signed by at least one authorized person. The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under 17-A MRSA §453. Please remit your payment made payable to the Maine Secretary of State. Submit completed form to: Secretary of State **Division of Corporations, UCC and Commissions 101 State House Station** Augusta, ME 04333-0101 Email Inquiries: CEC.Corporations@Maine.gov Telephone Inquiries: (207) 624-7752 Form No. MLLC-6 (2 of 2) Rev. 10/31/2012