

**EXPERIMENTAL LEASE APPLICATION****1. APPLICANT INFORMATION****A. CONTACT PERSON**

<b>Legal Name of Applicant(s):</b>	Brewers Oysters LLC.
<b>Contact Person:</b>	Jason Brewer & Christina Brewer
<b>Email:</b>	brewersoysters@gmail.com
<b>Telephone:</b>	(207)- 380-7085

**B. MAILING ADDRESS**

<b>Street Address:</b>	18 Split rock rd
<b>City:</b>	Walpole
<b>State:</b>	Maine
<b>Zip Code:</b>	04573

**C. PHYSICAL ADDRESS**

Same as mailing address

<b>Street Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip Code:</b>	

**D. PAYMENT METHOD**

<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
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### E. PENDING APPLICATIONS

<b>How many pending experimental lease applications (including this one) do you have pending?</b>	<input type="checkbox"/> One (1) <input checked="" type="checkbox"/> Two (2)  <i>Note: An applicant may have no more than two pending experimental leases at any time.</i>
<b>Do you have a legal interest in any entity that has a pending experimental application?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>If yes, provide the name of the applicant(s):</b>	N/A

## 2. PROPOSAL INFORMATION

### A. LOCATION OF PROPOSED LEASE SITE

<b>Town:</b>	Edgecomb
<b>County:</b>	Lincoln
<b>Waterbody:</b>	Damariscotta River
<b>General Description:</b>	Southeast of Salt Marsh cove

### B. PROPOSED LEASE INFORMATION

<b>Total Acreage Requested:</b>	1.9 acres
<b>Lease Term Requested:</b>	3 years
<b>Type of Culture:</b> (Check all that apply)	<input checked="" type="checkbox"/> Suspended (gear in the water and/or on the bottom) <input type="checkbox"/> Bottom (no gear)

### C. INTERTIDAL SITE

<b>Is any portion of the proposed lease site above mean low water?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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If you checked 'yes' you will need to complete section 11(J) of this application.

**D. RESEARCH PROGRAM**

<b>Type of Study:</b> (Check one)	<input type="checkbox"/> Scientific Research <input checked="" type="checkbox"/> Commercial Research
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<p><b>What is the purpose of the study?</b> If scientific, please include a detailed study design.</p> <p>To determine whether or not the cultivation of oysters at a larger scale is an adequate way to diversify our income.</p> <p>Our primary income comes from inshore lobstering in the Damariscotta river, which is seasonal and very unpredictable. Some years are profitable and some are not.</p> <p>Due to the future of lobstering constantly being in jeopardy for various reasons, we also want to introduce Aquaculture to our young adult children who have decided to become Lobstermen.</p>
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### 3. INTERAGENCY REVIEW INFORMATION

Lease applications are reviewed by other state and federal agencies. The questions below are intended to assist them with the review of your application.

<b>A. Is the proposed lease site located within any of the following habitat designations/areas?</b> Check all that apply.
<input type="checkbox"/> Essential Habitat (includes Roseate Tern habitat and Piping Plover/Least Tern habitat) <input type="checkbox"/> Shorebird Area <input type="checkbox"/> Tidal Waterfowl and Wading Bird Habitat

<b>B. Provide the water depth at mean high water.</b>
17' - 43'

<b>C. Provide the water depth at mean low water.</b>
7'-33'

<b>D. Are you proposing to use any suspended gear?</b>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>If yes, will the gear be submerged (below the surface of the water) at all tidal stages?</b>
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>E. Are you proposing predator netting?</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>If yes, what is the mesh size?</b>	N/A
<b>If yes, what is the twine size?</b>	N/A

<b>F. Is the proposal within 1,000 feet of any of the following?</b> Check all that apply. If you select one or more boxes you also need to provide the requested information that follows.	
<input type="checkbox"/> Docking facility owned by federal, state, or municipal governments <input type="checkbox"/> Beach owned by federal, state, or municipal governments	
<b>Provide the name of the docking facility and/or beach:</b>	
N/A	
<b>Proximity of the respective property to the proposed lease site in feet:</b>	
N/A	

<b>Select which level of government owns the respective property:</b>	
<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Municipal	
<b>Provide the name of the government entity that owns the respective property:</b>	N/A

<b>G. Is any portion of the proposal within a marked navigational channel?</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>If no, how far is the proposal from the nearest marked navigational channel? Provide the distance in feet.</b>	Boats travel 200'-1500' East of the site.

<b>H. Is the proposed site within 1,000 feet of any federal navigation project or anchorage?</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>If yes, identify the project or anchorage:</b>	N/A

<b>I. Will your operations discharge anything into the water such as feed (pellets, kelp, etc.) or chemical additives (therapeutants, chemical treatments, etc.)?</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

#### 4. ENVIRONMENTAL CHARACTERIZATION

The observations for all categories except ice formation must be based on an assessment conducted between April 1 and November 15, dates inclusive. Observation dates outside this timeframe will not be accepted.

<b>A. Describe the observed bottom characteristics of the proposed lease site:</b>	The bottom is mostly mud.
<b>Date of Observation:</b>	Every year since 1988, year round including April 1-Nov15
<b>B. Provide the speed of current:</b>	1-4 knots
<b>Date of Observation:</b>	Every year since 1988, year round including April 1-Nov15
<b>C. Provide the direction of current:</b>	North/south
<b>Date of Observation:</b>	Every year since 1988, year round , including April 1-Nov15
<b>D. Describe the fauna (animals) you have observed in the area:</b>	Lobster, crab, striped bass, menhaden, Alewife mackerel horseshoe crab, Periwinkle, harbor seal, cormorant, tern, seagull,
<b>Date of Observation:</b>	Every year since 1988, year round including April 1-Nov15
<b>E. Describe the flora (plants) you have observed in the area:</b>	Kelp and rockweed.
<b>Date of Observation:</b>	Every year since 1988, year round including April 1-Nov15

<b>F. Have you observed eelgrass within the boundaries of the proposed site?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Date of Observation:</b>	Every year since 1988, year round including April 1-Nov15
<b>Method of Observation:</b>	While lobstering during the summer at low tide.
<b>G. Have you observed eelgrass within 1,000 feet of the proposed site?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Date of Observation:</b>	April 1-Nov15 every year. No eelgrass for about 10 years.
<b>Method of Observation:</b>	Lobstering at low tide

**H. Describe ice formation during the winter months within the proposed lease boundaries.** The description needs to include data such as water temperature or ice out date over a 10 ten-year period or at least 5 years of observations from the harbormaster, shellfish warden, harbor committee, Marine Patrol Officer, or fishing community. Stating “no ice observed” will not be accepted as an answer.

I (Jason Brewer) have been working on this part of the Damariscotta River 37 years, including harvesting clams, bloodworms and periwinkles during the winters nearby. I also live less than two miles away from the site for 26 years, and my moorings are located about 1 mile away from the site. In that time, the site has only frozen one time, for approximately one week during January 2009.

## 5. SOURCE OF STOCK AND WATER QUALITY

### A. SPECIES AND SOURCE OF STOCK

Please use the applicable tables below to list all species you intend to cultivate on the proposed site.

#### 1. Source of Stock: Approved Shellfish Hatchery or Non-Shellfish Stock List

If you are sourcing from an approved hatchery or entity included on the non-shellfish stock list (maintained by DMR), please use the table below.

	Common Name	Latin Name	Name of Source	Stocking Density
1.	American oyster	Crassostrea Virginica	Muscongus bay aquaculture	200,000
2.	American oyster	Crassostrea Virginica	Merrymeeting shellfish co	100,000
3.	American oyster	Crassostrea Virginica	Downeast institute	100,000
4.				
5.				
6.				

**2. Source of Stock: Other Aquaculture Site(s)**

If you are sourcing from another aquaculture site in coastal waters please complete the table below.

	Common Name	Latin Name	Aquaculture Site ID	Water Body	Original Point of Origin	Stocking Density
1.	American oyster	Crassostrea Virginica	Jabr123	Damariscotta river	Bremen,ME	800-2,000/cage
2.	American oyster	Crassostrea Virginica	Jabr223	Damariscotta river	Bremen,ME	800-2,000/cage
3.	American oyster	Crassostrea Virginica	Jabr323	Damariscotta river	Bremen,ME	800-2,000/cage
4.	American oyster	Crassostrea Virginica	Jabr423	Damariscotta river	Bremen,ME	800-2,000/cage
5.	American oyster	Crassostrea Virginica	Cbre323	Damariscotta river	Bremen,ME	800-2,000/cage
6.	American oyster	Crassostrea Virginica	Cbre423	Damariscotta river	Bremen,ME	800-2,000/cage

**3. Source of Stock: Wild Stock**

If you are collecting marine organisms from Maine's coastal waters for deployment on the proposed site complete the table below.

	Common Name	Latin Name	Waterbody Collected From	Name of Licensed Harvester	Stocking Density
1.	N/A	N/A	N/A	N/A	N/A
2.					
3.					
4.					
5.					
6.					

**4. Scallops**

<b>Do you intend to possess whole or roe-on scallops?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If you answered 'yes' please be aware that biotoxin testing will have to be conducted on a regular basis at your expense. Please contact the Bureau of Public Health to discuss your plans at the following email: <a href="mailto:DMRPublicHealthDiv@maine.gov">DMRPublicHealthDiv@maine.gov</a>	

**B. GROWING AREA CLASSIFICATION**

<b>Growing Area Designation</b>	WQ
<b>Growing Area Classification</b>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Conditionally Approved <input type="checkbox"/> Restricted <input type="checkbox"/> Conditionally Restricted <input type="checkbox"/> Prohibited
If you are proposing to grow molluscan shellfish in waters classified as anything other than open/approved, you must contact: <a href="mailto:DMRPublicHealthDiv@maine.gov">DMRPublicHealthDiv@maine.gov</a>	

**C. BIRD DETERRENTS**

<p><b>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. Use the space below to list your mitigation or deterrent measures:</b></p>
<p>We use a combination of zip-ties and bird spikes attached to the floats.</p>

## 6. PROPOSED OPERATIONS

### A. CULTIVATION METHODS AND GEAR

<b>1. How will you culture marine organisms?</b>	<input checked="" type="checkbox"/> Gear <input type="checkbox"/> Bottom planting only (no gear proposed) <input type="checkbox"/> Combination: Both gear and free planting
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#### 2. Gear and Moorings Table

Use the table below to list all gear, longlines, moorings, and buoys that will be deployed within the boundaries of the proposed lease site.

Gear/Mooring Type	Dimensions	Dates of deployment	Maximum number deployed on site	Color	Species that will be grown using this gear type
200lb pyramid anchor	1.5'x.1.5'x1.5'	Year round	20	Brown	American oyster
50lb pyramid anchor marker weight	1'x1'x1'	Year round	6	Brown	American oyster
Galvanized chain	3/8"	Year round	700'	Silver	American oyster
Sink rope	1/2"-7/8"	Year round	1,800'	White	American oyster
Go-deep Buoys	10"x21"	Year round	26	20 black and 6yellow	American oyster
Oyster ranch/gro	40.5"Lx36"wx20"H	Year round	288	Black	American oyster
Mesh Bags (inside cages)	36"x18"x3"	Year round	1,152	Black	American oyster
Concrete block 900lb	2'x2'x1.5'	Year round	20	Gray	American oyster

Winter toggle 3.5"x 5". December-April 20 White. American oyster

#### 3. If you are also free planting, please provide the following:

<b>List all species that would be free planted</b>	None
<b>Describe the areas of the proposed site where free planting would occur. If it is the entire site, specify accordingly.</b>	N/A

#### 4. On Site Activity

At maximum capacity, which days of the week do you anticipate being on the site?	Generally Monday though Friday
At maximum capacity, what is the earliest time of day you would start work on the site?	7:00 AM
At maximum capacity, what is the latest time you would end work on the site?	6:00 PM
What months will seeding occur?	May- August
What is the maximum number of days it will take to seed the site?	1-7 days
Describe tending and maintenance activities:	Activities include flipping cages to dry weekly. sorting, cleaning oysters and harvesting 1-5 days per week. Maintenance would consist of checking or replacing anchors, chain, ropes, etc. when needed.
What months will harvesting occur?	January through December
How will you harvest each species? If you are using a drag, provide the dimensions.	Pulling out mesh bags with pre-sorted market size oysters from cages.

#### 5. Seasonality

Are there any seasonal changes to gear deployment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe:	Gear would likely remain on the surface year round. Cages would be sunken to the bottom only if we believe that there is a possibility of ice formation, if large amounts of ice are flowing through the area, or a severe storm is predicted.

**B. MOTORIZED EQUIPMENT AND LIGHTING**

<p><b>1. Are you proposing to use motorized equipment on the proposed lease?</b></p>	<p><input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>2. Are any of the noise sources fixed?</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
<p><b>3. If yes, describe your plan to direct the noise from residences or areas of routine use on adjacent land:</b></p>	<p>No fixed noise source. The small/quiet generator would have exhaust pointed north, away from houses when in use.</p>
<p><b>4. Does any of the equipment contain exterior lighting?</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
<p><b>5. Describe the measures taken to ensure that exterior lighting on the equipment only illuminates the target area and reduces glare:</b></p>	<p>N/A</p>
<p><b>6. Describe the measures taken to mitigate light impacts from equipment:</b></p>	<p>N/A</p>
<p><b>7. Are you proposing to use a generator?</b></p>	<p><input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>8. What is the generator used for?</b></p>	<p>Sorter/ tumbler and power washers.</p>
<p><b>9. What type of fuel does the generator take?</b></p>	<p><input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Other. Please specify:</p>

10. Which months would you use the generator? If year-round, specify accordingly.	January through December
11. What is the maximum number of days the generator would be used each year?	30- 60 days
12. Which days of the week will the generator be used?	Monday- Friday
13. What are the maximum hours a day the generator would be used?	4 hours
14. Do you intend to use a generator designed to mitigate noise?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15. What measures will you take to mitigate noise from the generator?	The small/quiet generator would be operated at the far northwest end of the proposed site far away from houses with exhaust pointed north. The land will also block the sound from residence.

### 16. Motorized Equipment Table

Use the table below to list each piece of motorized equipment (excluding vessels) that is proposed and answer the associated questions. Attach additional answers as necessary.

1. Equipment Name	Tumbler/sorter
What is the piece of equipment used for?	Sorting oysters.
Select the color(s) of this piece of equipment.	<input checked="" type="checkbox"/> Grays <input checked="" type="checkbox"/> Blacks <input type="checkbox"/> Browns <input type="checkbox"/> Blues <input type="checkbox"/> Greens <input type="checkbox"/> Other Please specify:

<b>Does the piece of equipment have any exterior lights?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>How is this piece of equipment powered?</b>	It is powered by the generator and a hydraulic system.
<b>Which months would this piece of motorized equipment be used? If year round, specify accordingly.</b>	July- November
<b>What is the maximum number of days that this piece of motorized equipment would be used?</b>	10-20 days per year
<b>Which days of the week would this of motorized equipment be used?</b>	Monday- Friday
<b>What are the maximum hours a day that this piece of motorized equipment would be used?</b>	4 hours
<b>What measures would be taken to mitigate noise from this piece of equipment?</b>	The equipment would only be used on the northwest end of the site, far away from any residence. The land will block the sound also.
<b>2. Equipment Name</b>	<b>Power washers</b>
<b>What is the equipment used for?</b>	Cleaning oysters
<b>Select the color(s) of this piece of equipment.</b>	<input checked="" type="checkbox"/> Grays <input checked="" type="checkbox"/> Blacks <input checked="" type="checkbox"/> Browns <input type="checkbox"/> Blues <input type="checkbox"/> Greens <input type="checkbox"/> Other Please specify:
<b>Does the piece of equipment have any exterior lights?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>How is this piece of equipment powered?</b>	The power washer is powered by a Generator.
<b>Which months would this piece of motorized</b>	January through December

equipment be used? If year round, specify accordingly.	January through December.
What is the maximum number of days that this piece of motorized equipment would be used?	1-3 days per week
Which days of the week would this of motorized equipment be used?	Monday-Friday
What are the maximum hours a day that this piece of motorized equipment would be used?	4 hours
What measures would be taken to mitigate noise from this piece of equipment?	The equipment would be operated at the Northwest corner of the site, far from houses The exhaust would be pointed north also.
3. Equipment Name	
3. Equipment Name	N/A
What is the equipment used for?	N/A
Select the color(s) of this piece of equipment.	<input type="checkbox"/> Grays <input type="checkbox"/> Blacks <input type="checkbox"/> Browns <input type="checkbox"/> Blues <input type="checkbox"/> Greens <input type="checkbox"/> Other Please specify: N/A
Does this piece of equipment have any exterior lights?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
How is this piece of equipment powered?	N/A
Which months would this piece of motorized equipment be used? If year round, specify accordingly.	N/A
What is the maximum number of days that this piece of motorized equipment would be used?	N/A
Which days of the week would this of motorized equipment be used?	N/A
What are the maximum hours a day that this piece of motorized equipment would be	N/A

used?	N/A
What measures would be taken to mitigate noise from this piece of equipment?	N/A

**C. FLOATING STRUCTURES**

1. Are you proposing any of the following? Check all that apply.	<input type="checkbox"/> Work Float <input type="checkbox"/> Barge <input type="checkbox"/> Other structure. Please specify: <input checked="" type="checkbox"/> Not proposing floating structure
2. Which months will the structure be within the boundaries of the proposed site?	N/A
3. Describe the purpose of the structure:	N/A
4. Provide the length and width in feet:	N/A
5. Provide the height as measured from the water line:	N/A
6. Provide the construction materials:	N/A
7. Select the color:	<input type="checkbox"/> Grays <input type="checkbox"/> Blacks <input type="checkbox"/> Browns <input type="checkbox"/> Blues <input type="checkbox"/> Greens <input type="checkbox"/> Other Please specify: N/A
8. Does the structure contain exterior lighting?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9. Describe the measures taken to ensure that exterior lighting on the structure only illuminates the target area and reduces glare:	N/A
10. What measures would you take to mitigate light impacts from the structure?	N/A

**D. BUILDINGS**

1. Are you proposing a shed, building or other similar structure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, what is the building, shed, or similar	N/A

structure used for?	N/A
2. What are the maximum number of days it would be within the boundaries of the site each year? If year-round specify accordingly.	N/A
3. Provide the length and width in feet.	N/A
4. What is the height (in feet) as measured from the waterline?	N/A
5. Describe the roofing materials. They cannot be reflective or glossy.	N/A
6. Describe the siding materials. They cannot be reflective or glossy.	
7. Select the color of the building.	<input type="checkbox"/> Grays <input type="checkbox"/> Blacks <input type="checkbox"/> Browns <input type="checkbox"/> Blues <input type="checkbox"/> Greens <input type="checkbox"/> Other Please specify: N/A
8. What measures would you take to minimize visual impacts as viewed from the water?	N/A

## E. VESSELS

### 1. Vessels Table

Use the table below to provide required information about the vessel(s) that may service the proposed site.

Type of Vessel	Engine type and HP:	Vessel Length in feet:	Height in feet as measured from the waterline:	How many days of the year would the vessel service the site?	How many hours each day would the vessel be on the site?
<sup>1</sup> lobster boat	220hp diesel	32'	8'	approximately 120. Many during winter	1 - 8 hours
<sup>2</sup> Carolina skiff	4 stroke 50hp	20'	3'	Approximately 20	1-8 hours
<sup>3</sup> Lobster skiff	4 stroke 75 hp	21'	5'	Approximately 20	1-8 hours
4.					

**2. From where will the service vessels be launched? Check all that apply.**

Public boat launch  
 Private property owned by the applicant  
 Other. Please specify: Our moorings are located in Clark's cove, approximately one mile southeast.

**3. Are you storing petroleum products on the proposed site?**  Yes  No

If yes, you need to attach a spill prevention and control plan to this application.

### 7. EXISTING USES

This section asks questions about the activities you have personally observed in the area.

#### A. COMMERCIAL NAVIGATION

**1. When did you complete your observations of commercial vessel navigation in the area?**  
 Include the month(s) and year(s).

Month(s): January through December      Year(s): 1988-2025

**2. What types of commercial vessels did you observe navigating in the area?**

Lobster boats, (all of which are owned by our family members, friends, and us).  
 Pogy seiners, clamming skiffs, and aquaculture skiffs.

**3. What was the approximate length of the commercial vessels you observed?**

17'-40'

**4. How many commercial vessels did you observe navigating in the area?**

8-12

**5. Did any commercial vessels transit through the boundaries of the proposed site?**

Yes  No

If yes, how many commercial vessels transited through the boundaries: N/A

<b>6. What is the typical direction of commercial vessel traffic?</b>
North/south

**B. RECREATIONAL NAVIGATION**

<b>1. When did you complete your observations of recreational vessel navigation in the area?</b> Include the month(s) and year(s).	
Month(s): January through December	Year(s): 1988-2025
<b>2. What types of recreational vessels did you observe navigating in the area?</b>	
We have observed nearly every type of boat navigating through the channel. Including: sailboats, speedboats, jet skis, yachts, etc.	
<b>3. What were the approximate size of the recreational vessels you observed?</b>	
10'-50'	
<b>4. How many recreational vessels did you observe navigating in the area?</b>	
5-25 boats travel through the channel per day during the summer	
<b>5. Did any recreational vessels transit through the boundaries of the proposed site?</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, how many recreational vessels transited through the boundaries: N/A	
<b>6. What is the typical direction of recreational vessel traffic?</b>	
North/south	

**C. MOORINGS**

<b>1. When did you complete your observations of moorings in the area?</b> Include the month(s) and year(s).	
Month(s): January through December	Year(s): Every year since 1988
<b>2. Are there any moorings within the vicinity of the proposed lease site?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>3. How many moorings are within 1,000 feet of the proposed site?</b>	None
<b>4. What type of vessels utilize the moorings? Check all that apply.</b>	<input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Recreational
<b>5. What is the distance (in feet) from the</b>	1600'+

proposed lease site to the closest observed mooring?	1600'+
6. What is the length (in feet) of the vessel that utilizes this mooring?	Approximately 12' skiff

#### D. COMMERCIAL FISHING

<b>1. When did you complete your observations of commercial fishing in the area?</b> Include the month(s) and year(s).	
<b>Month(s):</b> January through December	<b>Year(s):</b> 1988-2025
The following questions are specific to commercial fishing that may occur within the boundaries of the proposed site.	
<b>2. Does any commercial fishing occur within the boundaries of the proposed site?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>3. List the type of commercial fishing that occurs within the boundaries of the proposed site.</b>	None within boundaries.
<b>4. What months does commercial fishing activity occur within the boundaries of the proposed site?</b>	None within the site the boundaries
<b>5. How many people commercially fish within the boundaries of the proposed lease area?</b>	None within the boundaries.
The following questions are specific to commercial fishing that may occur within the vicinity of the proposed site.	
<b>6. Does any commercial fishing occur within the vicinity of the proposed site?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>7. List the type of commercial fishing that occurs within the vicinity of the proposed site.</b>	Lobstering, and occasional Pogy seining
<b>8. What months does commercial fishing activity occur within the vicinity of the proposed site?</b>	June- December
<b>9. How many people commercially fish in the vicinity of the proposed site?</b>	8 total.3 besides us and family members

#### E. RECREATIONAL FISHING

<b>1. When did you complete your observations of recreational fishing in the area?</b> Include the month(s) and year(s).	
<b>Month(s):</b> January through December	<b>Year(s):</b> 1988-2025
The following questions are specific to recreational fishing that may occur within the boundaries of the proposed site.	
<b>2. Does any recreational fishing occur within</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

the boundaries of the proposed site?	No
3. List the type of recreational fishing that occurs within the boundaries of the proposed site.	None within boundaries
4. What months does recreational fishing activity occur within the boundaries of the proposed site?	None within boundaries
5. How many people recreationally fish within the boundaries of the proposed lease area?	None within boundaries
The following questions are specific to recreational fishing that may occur within the vicinity of the proposed site.	
6. Does any recreational fishing occur within the vicinity of the proposed site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7. List the type of recreational fishing that occurs within the vicinity of the proposed site.	Stripped bass and mackerel
8. What months does recreational fishing activity occur within the vicinity of the proposed site?	June - October
9. How many people recreationally fish in the vicinity of the proposed site?	Recreational fishing is rare. We have only observed 3-4 fishermen nearby ever

## F. RIPARIAN INGRESS AND EGRESS

1. When did you complete your observations of riparian ingress and egress in the area? Include the month(s) and year(s).	
Month(s): January through December	Year(s): 1988-2025
2. Describe the shoreline in the vicinity of the lease proposal.	
Rocky shoreline with wooded upland.	
3. Have you observed any riparian owned vessel(s) accessing the shoreline?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. What type of vessel(s) did you observe?	None
5. Describe the length (in feet) of the vessel(s).	N/A
6. Describe the surrounding uplands in the vicinity of the lease proposal.	
Wooded upland with no houses.	

### G. DOCKS

1. Are there any docks in the area?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. If yes, how many are within 1,000 feet of the proposed site?	None
3. Have you observed any vessels accessing or secured to the docks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. If yes, what is the length (in feet) of the vessels observed?	Approximately 12' skiff
5. What is the distance (in feet) from the proposed lease site to the closest observed dock?	1300'+

### H. OTHER WATER RELATED USES

Do any of the following activities occur within the vicinity of the proposed site? Check all that apply and answer the associated questions.			
Activity	Month(s) of Observation	How many persons or vessels were engaged in the activity?	Location
<input checked="" type="checkbox"/> Kayaking	June- September	3	<input type="checkbox"/> Within the proposal boundaries <input checked="" type="checkbox"/> Within the vicinity of the proposed site.
<input type="checkbox"/> Swimming			<input type="checkbox"/> Within the proposal boundaries <input type="checkbox"/> Within the vicinity of the proposed site
<input checked="" type="checkbox"/> Other. Please specify:	Stand up paddle boarding	2	<input type="checkbox"/> Within the proposal boundaries <input checked="" type="checkbox"/> Within the vicinity of the proposed site.

**I. OTHER AQUACULTURE SITES**

**1. Limited Purpose Aquaculture (LPA) License(s)**

Are there any LPA licenses within the boundaries of the proposed site?	No
If yes, provide the LPA site ID(s)	N/A
Are there any LPA sites within 1,000 feet of the boundaries of the proposed site?	4 have been on the DMR map
If yes, provide the LPA site ID(s)	for years, but no gear or buoys

have ever been placed on any of the sites AROG121,221,321,421  
Christina has also applied for 2 LPAs north.

**2. Experimental Aquaculture Lease(s)**

Is any portion of an experimental lease within the boundaries of the proposed site?	No
If yes, provide the experimental lease site ID	N/A
Is there an experimental lease within 1,000 feet of the boundaries of the proposed site?	No
If yes, provide the experimental lease site ID	N/A

**3. Standard Aquaculture Lease(s)**

Is any portion of a standard lease within the boundaries of the proposed site?	No
If yes, provide the standard lease site ID	N/A
Is there a standard lease within 1,000 feet of the boundaries of the proposed site?	No
If yes, provide the standard lease site ID	N/A

## 8. OPERATIONAL CAPABILITY

This section asks questions about technical capability, compliance history, and estimated costs.

### A. TECHNICAL CAPABILITY

<b>Do you or any other applicant hold existing aquaculture sites?</b>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, please complete the table below for each aquaculture site held. Please attach additional entries as necessary.</b>			
Name of Holder	Type of Site	Site ID	Acreage (if a lease). Do not provide a size for LPA sites.
Jason Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	JABR123	LPA
Jason Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	JABR223	LPA
Jason Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	JABR323	LPA
Jason Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	JABR423	LPA
Christina Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	CBRE323	LPA
Christina Brewer	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input checked="" type="checkbox"/> LPA	CBRE423	LPA
	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input type="checkbox"/> LPA		
	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input type="checkbox"/> LPA		
	<input type="checkbox"/> Experimental <input type="checkbox"/> Standard <input type="checkbox"/> LPA		

**List your skills and experiences working on the water:**

I (Jason Brewer) have been working on this river every year for more than 30 years. All of my income has been from the fishing industry. Christina and I started LPAs growing oysters in 2023, after having multiple non-profitable lobster seasons. Christina has been lobstering with me as my sternman for many years. She has 2 LPAs and also has held an active elver license since 2005.

**B. COMPLIANCE HISTORY**

In 30+ years of marine harvesting every year, year round:

<b>Have you been convicted of violating any state or federal marine resource laws?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Digging more than 125 marine worms without a license in 2011
<b>Have you been adjudicated to be responsible for violating any state or federal marine resource laws?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    And "failure to provide accurate elver landing report" from year 2013 report because just ONE day inadvertently was not reported.

**C. FINANCIAL ESTIMATES**

Use the space below to provide requested cost estimates of the planned aquaculture activities, if approved, as they relate to this proposal.

<b>Annual Lease Rent</b>	\$100 per acre
<b>Annual DMR Licensing Fees</b>	\$500
<b>Annual cost to maintain the bond or commitment amount for the escrow account</b>	\$5,000 escrow
<b>Annual Equipment Costs</b>	\$5,000-\$100,000
<b>Annual Maintenance Costs</b>	\$5,000-\$10,000

## 9. RIPARIAN LANDOWNER NOTIFICATION

<b>Is the proposal within 1,000 feet of shorefront land (which extends to mean low water or 1,650 feet from shore, whichever is less, according to NOAA charts).</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	---

**If yes, please submit the following:**

- Include a completed riparian landowner list. If the site is in more than one municipality, you need to submit separate lists for each town/city.
- Make sure the list is certified by the municipality. The person certifying the list on behalf of the municipality should review the tax records and is typically the town clerk, tax assessor, or other individual familiar with these records.
- Include a tax map that displays the: town name, parcels numbered clearly, legible scale, and boundaries of the proposed lease site.

## RIPARIAN LANDOWNER LIST

Using municipal tax records, complete the table below for all riparian shorefront parcels within 1,000 feet of the proposed lease site. **It is the applicant's responsibility to assemble the information for the municipality to certify.** The municipality *only* certifies that the information is correct according to the town's tax records. Once you have completed the form, ask the municipality to complete the certification section below. Attach additional pages as necessary.

<b>Name of Municipality:</b>	Edgecomb
------------------------------	----------

Tax Map Number	Lot Number	Name of Landowner(s)	Mailing Address (Based on municipal tax records)
R05	052	Bennetts Neck corp. c/o Eddy, Latimer & Eddy, Stetson	47 Sawmill park Southwick, MA. 01077
R05	053	Japinga, Ronald & Japinga, Susan	6849 Breezyglen Drive Moorpark, CA. 93021
R05	054	Japinga, Ronald & Japinga, Susan	6849 Breezyglen Drive Moorpark, CA. 93021
R05	051-2	Nutt, David	113 River Rd Edgecomb, ME 04556

### Town Certification

By signing below, I am certifying on behalf of the municipality listed above that the names and addresses of the property owners, including the map and lot numbers, are those listed in the records of this municipality and are current as of ~~this date.~~ *April 1, 2025*

<b>Printed Name:</b>	<i>Claudia P. Coffin</i>
<b>Signature:</b>	<i>Claudia P. Coffin</i>
<b>Position:</b>	<input checked="" type="checkbox"/> Town Clerk <input type="checkbox"/> Town Assessor <input type="checkbox"/> Other town official. Please specify:
<b>Date:</b>	<i>2/17/2026</i>

### 10. SITE COORDINATES

This section will ask you to provide your coordinates in decimal degrees, starting with the NW corner and proceeding clockwise. WGS-84 is the required datum.

Corner Label	Latitude (N)	Longitude (W)
1 (NW corner)	43.94656°	69.58466°
2	43.94641°	69.58425°
3	43.94512°	69.58489°
4	43.94469°	69.58515°
5	43.94486°	69.58556°
6	43.94530°	69.58529°
7		
8		
9		
10		
11		
12		
13		
14		
15		

## 11. RENDERINGS & ATTACHMENTS

### SITE LOCATION

#### A. BOUNDARY DRAWING

Depict the boundaries of the proposed site with corners labeled as referenced in the site coordinate table. Start with corner 1 (NW corner) and proceed clockwise with the labeling.

- Label the rendering 'Boundary Drawing'
- All corners are labeled in accordance with the instructions and match the coordinate table.

#### B. VICINITY MAP

Using a NOAA Chart, show the area within a minimum of 3,000 feet of the proposed lease site. The vicinity map needs to include the following:

- Label the rendering 'Vicinity Map'
- Lease boundaries
- 1,000-foot radius buffer around each corner
- Arrow indicating true north
- Scale bar

### GEAR SCHEMATICS

If you are proposing any gear or structure, you must provide the following renderings.

#### C. OVERHEAD VIEW

- Label the rendering 'Overhead View'
- Include the maximum layout of all gear, including moorings
- Label each gear type
- Depict the location of floats or other associated structure
- Approximate spacing between gear in feet
- Length and width of the proposed site
- Lease boundaries and the location of proposed corner markers and any additional gear markers that would be present.
- Gear orientation

#### D. SEASONAL OVERHEAD VIEW

If there are seasonal changes to the gear layout (i.e. overwintering), submit an overhead view depicting the following:

- Label the rendering 'Seasonal Overhead View'
- Include the maximum layout of all gear, including moorings

- Label each gear type
- Depict the location of floats or other associated structure
- Approximate spacing between gear in feet
- Length and width of the proposed site
- Lease boundaries and the location of proposed corner markers and any additional gear markers that would be present
- Gear orientation

#### **E. CROSS SECTION VIEW**

- Label the rendering 'Cross Section View'
- Profile of gear in cross-section as it will be deployed
- Label each gear type
- Depict mooring type
- Depict mooring scope
- Depict mooring hardware
- Depict mooring line type and size
- Depict the depth of the gear in relationship to the water's surface at both mean low water and mean high water

#### **F. SEASONAL CROSS SECTION VIEW**

If there are seasonal changes to the gear layout (i.e. overwintering), submit a cross section view depicting the following:

- Label the rendering 'Seasonal Cross Section View'
- Profile of gear in cross-section as it will be deployed
- Label each gear type
- Depict mooring type
- Depict mooring scope
- Depict mooring hardware
- Depict mooring line type and size
- Depict the depth of the gear in relationship to the water's surface at both mean low water and mean high water

#### **G. STRUCTURE/FLOAT SCHEMATICS** *N/A*

Provide a schematic or photos of any structures or floats that are proposed. The schematic(s) need to include the following:

- The location of any lights (if applicable)
- Approximate location of any mechanized equipment that may be used or stored on the structure. The equipment must be labeled.

## H. EQUIPMENT LAYOUT

- Provide schematic or photographic renderings of the generalized layout of the equipment as depicted from **two** vantage points on the water (i.e. what will your site look like on the water from different points)
  
- Provide the locations of the two vantage points.

## OTHER ATTACHMENTS

### I. OIL SPILL PREVENTION AND CONTROL PLAN *N/A*

If petroleum products are stored on the proposed site, you need to attach a spill prevention and control plan. It must include the following:

- Procedures and control measures to prevent spills.
- Measures to contain, cleanup, and mitigate the effects of an oil spill that has impacted navigable waters or adjoining shorelines.

### J. FINANCIAL INSTITUTION LETTERS

- In accordance with regulation, you must include a letter from a financial institution indicating you have an account in good standing. If there are multiple applicants, they each submit letters.

### K. INTERTIDAL SITES

If any portion of the proposed site is above mean low water, you need to provide the following under 1) and 2):

#### 1. Landowner Written Permission

All riparian owners whose intertidal lands will be used for aquaculture need to give the applicant written permission to use intertidal lands. You need to submit this written permission with your application. DMR will not accept the application without the required permission.

The written permission must include the following:

- The map and lot number of the parcel to which the permission applies, which needs to match what is listed on the riparian landowner list.

The letter must include the names(s) of the landowner(s). If the parcel is held by multiple people, each individual needs to provide permission. It can be included in the same letter, but it needs to be clear that all owners of the parcel consent.

The letter must clearly state that the parcel owner is giving the applicant(s) **permission to use their intertidal lands** for the proposed aquaculture activities. General letters of support from the parcel owner do not satisfy this requirement.

If the intertidal land is owned by the applicant(s) then an 'Applicant Statement' must be included with the submission. The submission needs to include the map and lot number of the parcel owned.

**2. Municipal Permission** *N/A*

Does the municipality have a shellfish conservation program in accordance with 12 M.R.S.A. section 6671?	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

If you selected "no" then part 2) is not required.

If you selected "yes" then you also need to submit the following with your application:

The **municipal officials** need to consent to using the intertidal area. Consent means that a majority of the municipal officials voted to grant permission to use the intertidal area. The vote needs to occur during a public meeting.

After the meeting, you will need to submit one of the following:

A copy of the final meeting minutes that includes the text of the motion and the results of the vote, which demonstrates that a majority of municipal officials gave consent to the applicant(s) to use the intertidal area. Draft copies of meeting minutes will not be accepted.

**OR**

A letter from the municipality that summarizes the meeting when the vote was taken. The letter needs to include:

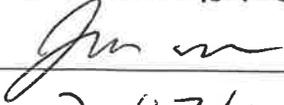
- The date of the meeting.
- Text of the motion.
- The vote of each municipal official (they need to be individually named).
- Name and signature of the individual submitting the letter on behalf of the town.

## 12. ACKNOWLEDGEMENT AND SIGNATURE PAGE

Every listed applicant needs to complete and include a copy of this form with the submission. If the applicant is a company, this needs to be completed and signed by a person authorized to make such certifications and submissions on behalf of the company.

### Please read and check box confirming understanding

- I have read DMR's aquaculture laws and regulations and will comply with those provisions.
- I understand that lease proposals are evaluated in consideration of applicable decision criteria and processed in accordance with relevant law and rules. Applying for a lease is not a guarantee that this site will be granted or otherwise granted as originally applied for.
- I understand that lease application fees are non-refundable.
- I understand that falsifying any information in this application will result in termination of the application or other enforcement action.
- I understand that it is my responsibility to submit a copy of this application to the U.S. Army Corps of Engineers (USACE) and that their review process is separate from DMR's. If I have questions about the USACE process or review, I will contact that agency.
- I read the lease application instructions. I will follow the instructions and provide any requested information in a timely manner.
- If the lease is granted, I understand that all gear, including moorings, are required to remain within the boundaries of the proposed lease site at all tidal stages. I understand that if the lease is granted, failure to keep gear, including moorings, within the boundaries of the site will result in compliance action including possible revocation of the site.
- I will mark the site in accordance with Chapter 2.80 of DMR's regulations.

<b>Printed Name</b>	Jason Brewer
<b>Signature</b>	
<b>Date</b>	2/17/2026

## 12. ACKNOWLEDGEMENT AND SIGNATURE PAGE

Every listed applicant needs to complete and include a copy of this form with the submission. If the applicant is a company, this needs to be completed and signed by a person authorized to make such certifications and submissions on behalf of the company.

### Please read and check box confirming understanding

- I have read DMR's aquaculture laws and regulations and will comply with those provisions.
- I understand that lease proposals are evaluated in consideration of applicable decision criteria and processed in accordance with relevant law and rules. Applying for a lease is not a guarantee that this site will be granted or otherwise granted as originally applied for.
- I understand that lease application fees are non-refundable.
- I understand that falsifying any information in this application will result in termination of the application or other enforcement action.
- I understand that it is my responsibility to submit a copy of this application to the U.S. Army Corps of Engineers (USACE) and that their review process is separate from DMR's. If I have questions about the USACE process or review, I will contact that agency.
- I read the lease application instructions. I will follow the instructions and provide any requested information in a timely manner.
- If the lease is granted, I understand that all gear, including moorings, are required to remain within the boundaries of the proposed lease site at all tidal stages. I understand that if the lease is granted, failure to keep gear, including moorings, within the boundaries of the site will result in compliance action including possible revocation of the site.
- I will mark the site in accordance with Chapter 2.80 of DMR's regulations.

<b>Printed Name</b>	Christina Brewer
<b>Signature</b>	Christina Brewer
<b>Date</b>	2/18/2026

# Boundary Drawing



1- NW-43.94656°  
069.58466°

2- NE -43.94641°  
069.58425°

3- E-Middle-43.94512°  
069.58489°

4- Southeast- 43.94469°  
069.58515°

5- Southwest-43.94486°  
069.58556°

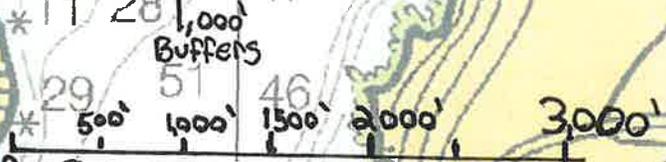
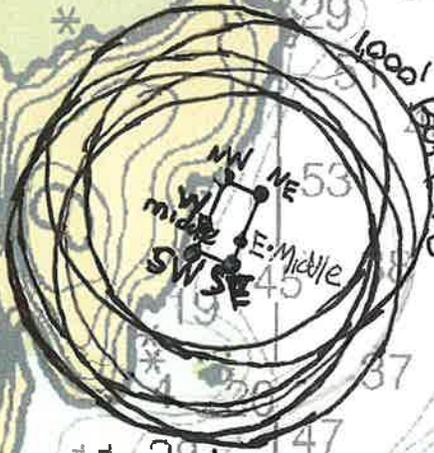
6- W-middle-43.94530°  
069.58529°

# VICINITY MAP



69° 30'

Salt Marsh  
Cove



SCALE

Wadsworth Cove

Wentworth Pt

Lowes Cove

McGuire Pt

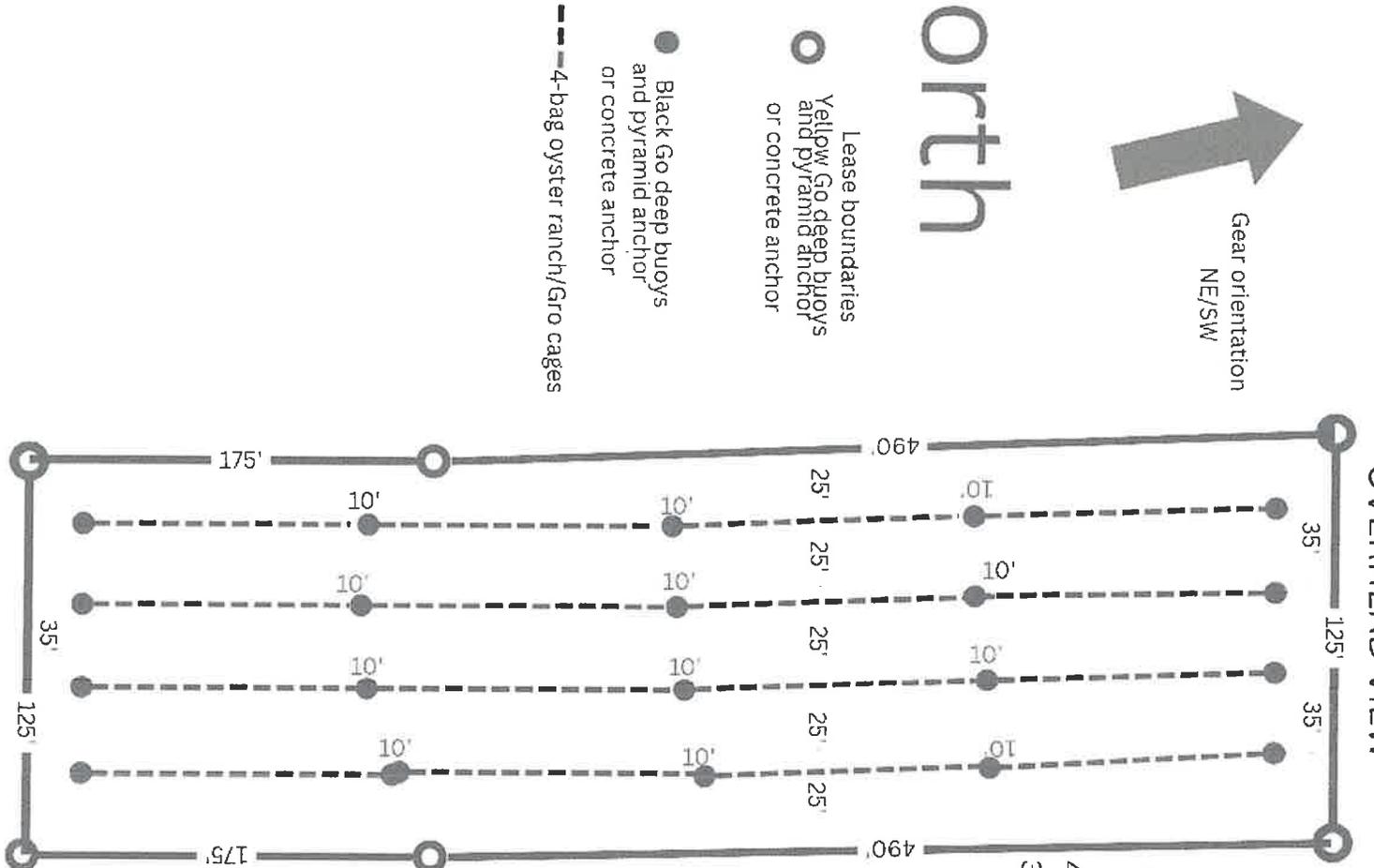
Clark  
Shellfish

Merry I  
G 56  
"15"

Kelsey Pt

RN "14"  
RK

OVERHEAD VIEW



Gear orientation  
NE/SW

North

○ Lease boundaries  
Yellow Go deep buoys  
and pyramid anchor  
or concrete anchor

● Black Go deep buoys  
and pyramid anchor  
or concrete anchor

--- 4-bag oyster ranch/Gro cages

Max. of 18 oyster ranch/Gro cages per line spaced 2.5'  
10' between lines.  
45' between end cages and North+South boundaries  
35' between end buoys and North/South boundaries  
25' wide (East/West) between lines  
Maximum of 16 lines total  
1.5:1-2:1 chain & rope scope at MHW on all anchor  
cages 1' below & 1' above surface at all tidal stages

Maximum of 288 cages total.

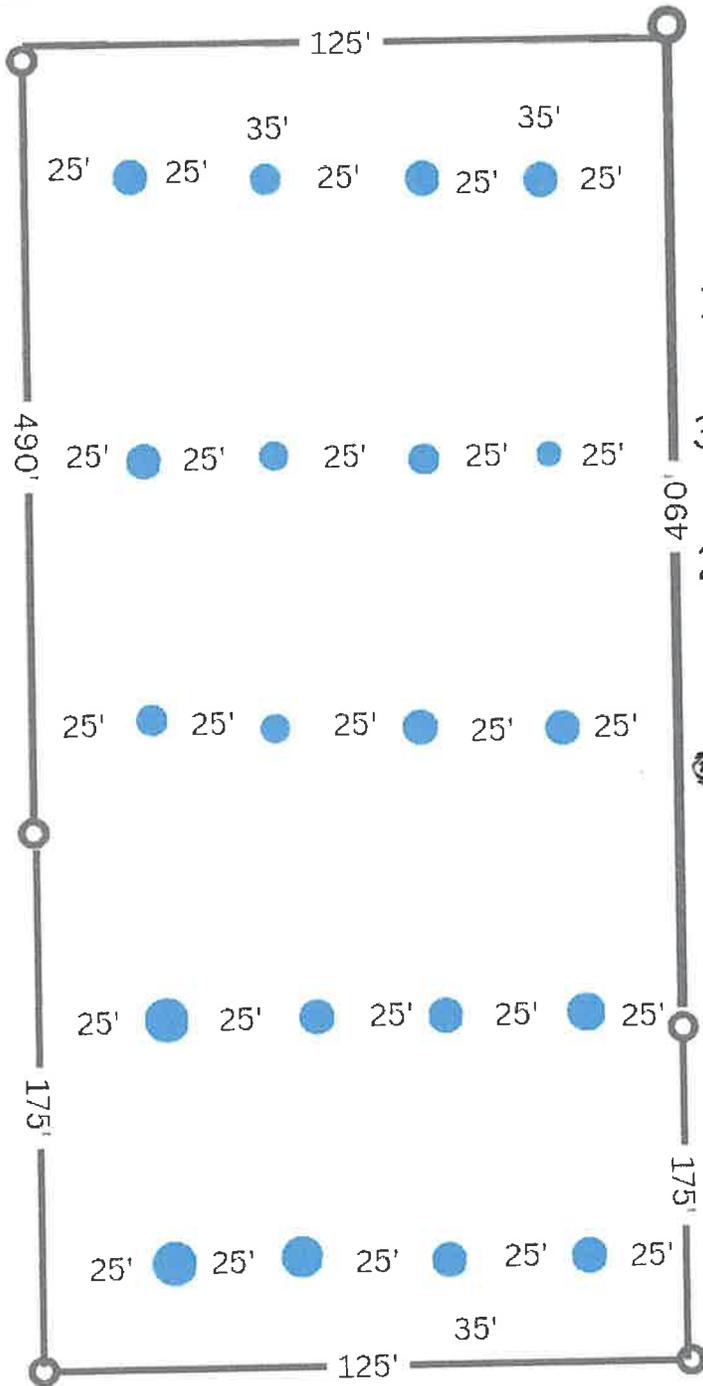
Seasonal Overhead view  
December-April



○ Yellow Go deep marker Buoys 10" x 21"

● winter toggles 3.5" x 5"

▬ Oyster ranch/Gro cages 40.5x36x24 on bottom. (Not visible).



18 oyster ranch/gro cages  
per line spaced 2.5'  
10' between lines  
10' between end cages and  
buoys  
35' between end buoys and  
North/South boundaries  
25' apart wide North/South  
16 maximum lines

~~NE-SW~~  
NE-SW  
gear orientation

Oyster ranch/gro cages on bottom  
at all tidal stages

Go-deep buoys 10"x21"

# Cross-section view

3/8" galvanized chain & 7/8" rope, 4 thimbles & 6 shackles-1/2"

1.5:1-2:1 scope at MHW

oyster ranch/Gro cages

40.5"x 36"x 24"

200 LB pyramid anchor or

900LB concrete block

1/2"-7/8" sink rope

Not actual number of cages

Cages 1' above & 1' below the

surface at all tidal stages

surface

MHW average 30'

MLW average 20'

Maximum: 18 oyster ranch/Gro 4-bag cages per line

2.5' between Cages, 10' between lines

45' between end cages and North/South boundaries

35' between end buoys and N/S boundaries

25' wide East/West between lines

16 lines, maximum of 288 cages

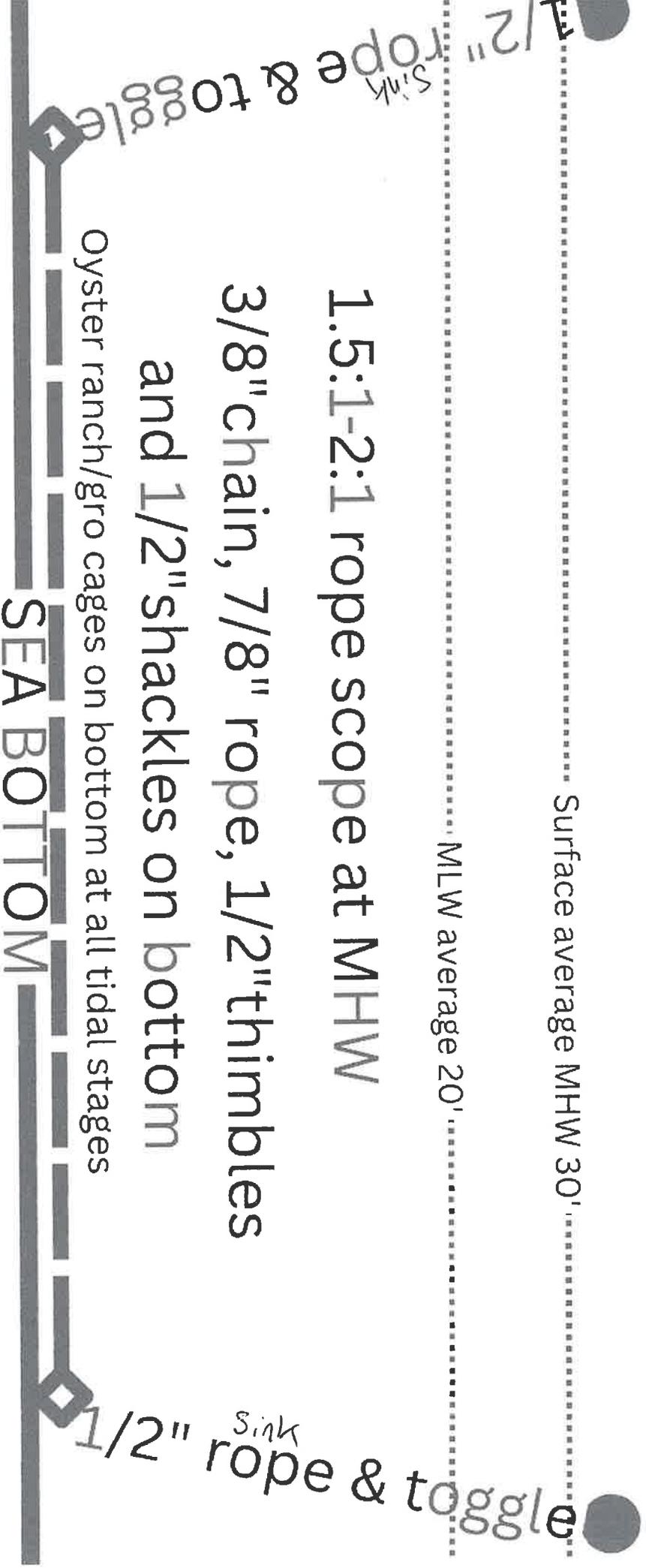
Mud bottom

3/8" chain on bottom half 7/8" rope on top

3/8" chain on bottom half 7/8" Rope on top

# Seasonal Cross Section View

December to April



1.5:1-2:1 rope scope at MHW

3/8" chain, 7/8" rope, 1/2" thimbles

and 1/2" shackles on bottom

Oyster ranch/gro cages on bottom at all tidal stages

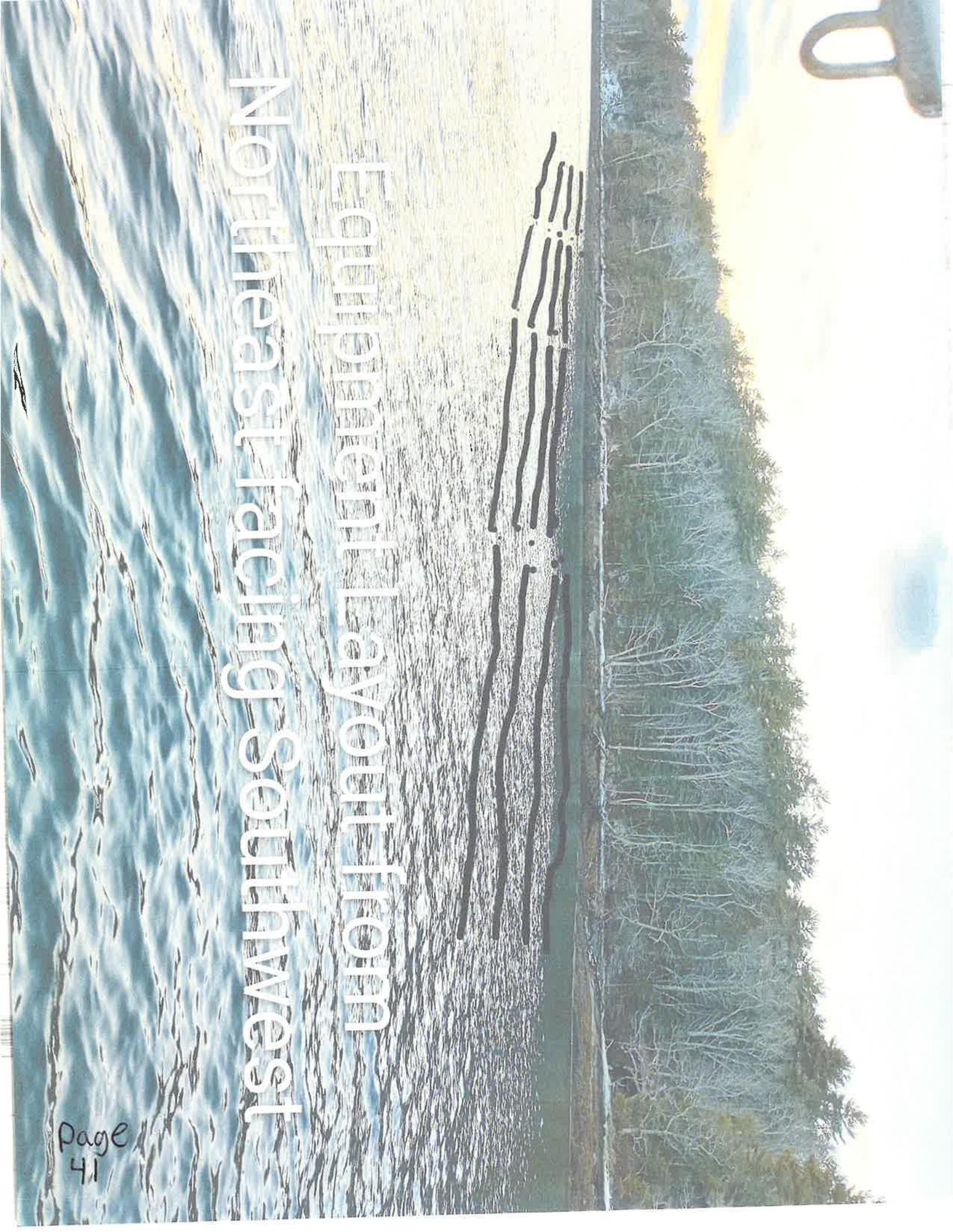
SEA BOTTOM

pyramid anchor or concrete block  
Maximum: 18 cages per line spaced 2.5'

10' between lines and end buoys

Lines spaced 25' wide East/West

Maximum: 16 lines, maximum: 288 cages total

A scenic view of a lake with a forested shoreline and a small island in the distance. The water is calm with gentle ripples. The sky is bright and clear. The text is overlaid on the image.

# Equipment layout from Northeast facing Southwest



# Equipment Layout

## from East facing West



To Whom It May Concern:

RE: Account verification

Please accept this letter as funds verification for Christina and Jason Brewer, as of today January 06, 2026 the account has funds available and account is in good standings.

Sincerely,

A handwritten signature in cursive script that reads "Bonnie Colby".

**Bonnie Colby** | Banking Consultant  
**First National Bank**, a division of The First Bancorp

# GEAR PLAN



4 bag oyster ranch/gro cage  
40.5" x 36" x 24"



mesh bag  
(inside cages)  
36" x 18" x 3"



200lb pyramid anchor



50lb pyramid anchor



3/8" galvanized chain



900 LB concrete block  
2'x2'x1.5'



Co deep Buoy 10" x 21"

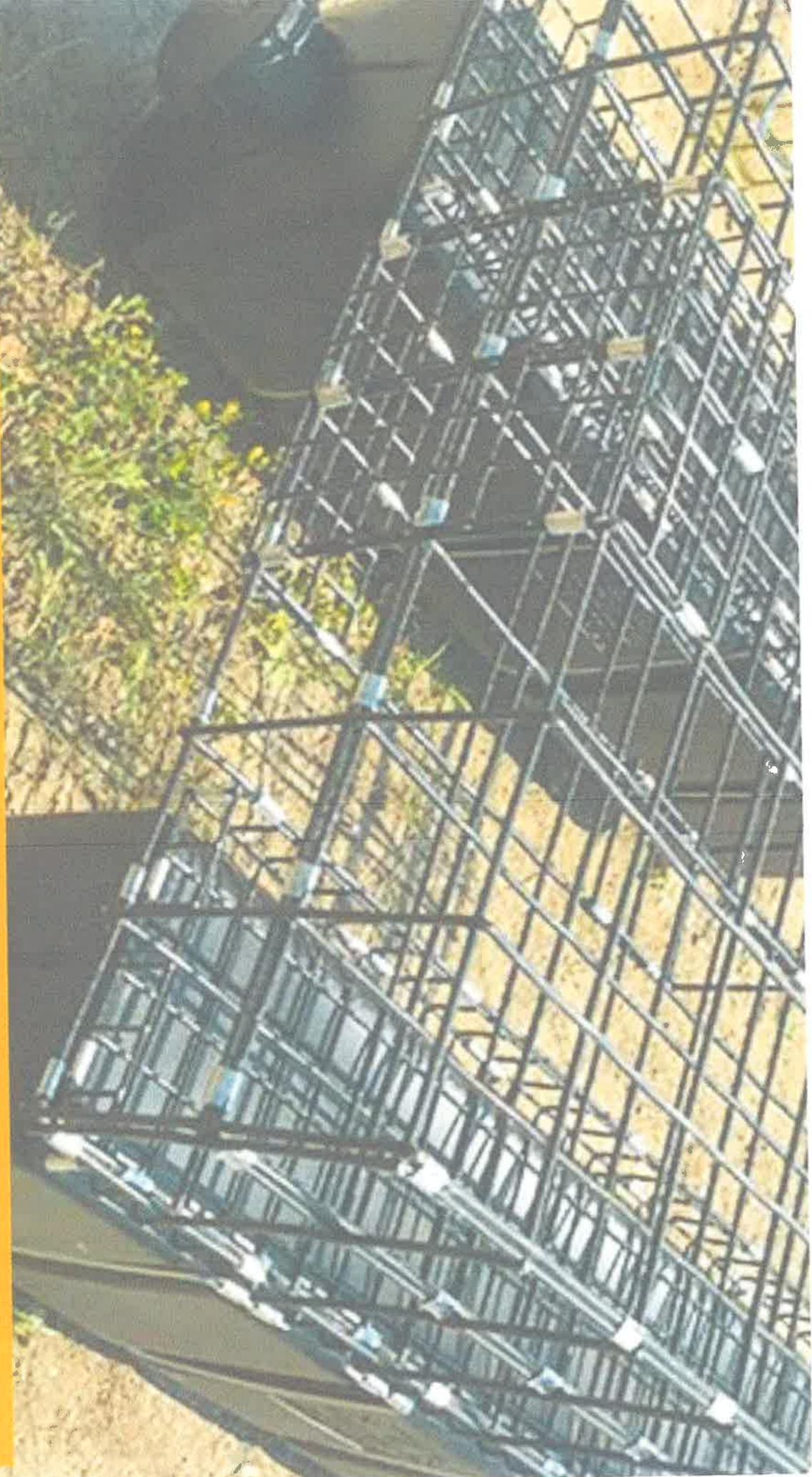
Deep 10" x 21" HD buoy



sink rope  
1/2" - 7/8"



winter toggle 3.5" x 5"



# GEAR PLAN

4-bag Oyster Ranch/Gro cage

40.5" x 36" x 24"



# Tax map enlarged





# MAINE DEPARTMENT OF MARINE RESOURCES

Aquaculture Division, 21 State House Station, Augusta, ME 04333-0021 (207) 350-7815

## 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 A. Corporate Applicant. Partnerships must submit information as requested under B. Partnership Applicant.

### 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: Brewers Oysters LLC

2. Date of incorporation: 6/18/2024 State of incorporation: Maine

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

Name	Address	Title
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	Owner
Christina Brewer	18 Split Rock Rd Walpole, ME 04573	Owner

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

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

Name	Address

**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?  Yes  No

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

Jason Brewer, status: Experimental lease under review

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
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	50%
Christina Brewer	18 Split Rock Rd Walpole, ME 04573	50%

**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
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	JABR123	LPA
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	JABR223	LPA
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	JABR323	LPA
Jason Brewer	18 Split Rock Rd Walpole, ME 04573	JABR423	LPA
Christina Brewer	18 Split Rock Rd Walpole, ME 04573	CBRE323	LPA
Christina Brewer	18 Split Rock Rd Walpole, ME 04573	CBRE423	LPA

**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?

Yes  No

If you selected "yes", please provide details:

#1 "possession of more than 125 marine worms without a license" in 2011.  
#2 "Failure to provide accurate elver landing report" from year 2013 report, because one day inadvertently was not reported.

**B. Partnership Applicant** N/A

**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:     N/A    

2. Date of formation: \_\_\_\_\_ State of Partnership: \_\_\_\_\_

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

Name	Address	Ownership Shares

**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?  Yes  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 person, based on their ownership shares from question 3.

Name	Address	Lease Acronym	Acreage

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

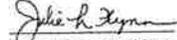
6. Has the partnership or any partner been arrested, indicted or convicted of or adjudicated to be responsible for any violation or marine resources or environmental protection law, whether State or Federal?  Yes  No

If you selected "yes", please provide details:

MAINE  
LIMITED LIABILITY COMPANY  
STATE OF MAINE  
CERTIFICATE OF FORMATION

Filing Fee \$1

Charter Number: 202407912DC  
Filing Number: 20240913214590201 Pages: 2  
Form: DLLC Fee Paid: \$175  
Filing Date: 06/18/2024 12:24PM

  
Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Deputy Secretary of State

Pursuant to 31 MRSA §1531, the undersigned executes and delivers the following Certificate of Formation:

**FIRST:** The name of the limited liability company is:

Brewer's Oysters LLC

(A limited liability company name must contain the words "limited liability company" or "limited company" or the abbreviation "LLC," "LLC," "L.C." or "LC" or, in the case of a low-profit limited liability company, "L3C" or "l3c" - 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. M.L.L.C-6 (1 of 2)

**FIFTH:**

The Registered Agent is a: (select either a Commercial or Noncommercial Registered Agent)

Commercial Registered Agent

CRA Public Number: \_\_\_\_\_

\_\_\_\_\_  
(Name of commercial registered agent)

Noncommercial Registered Agent

**Jason Brewer**

\_\_\_\_\_  
(Name of noncommercial registered agent)

**18 Split rock road, Walpole, ME, 04573**

\_\_\_\_\_  
(physical location, not P.O. Box – street, city, state and zip code)

\_\_\_\_\_  
(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.

**SEVENTH:**

Other matters the members determine to include are set forth in the attached Exhibit \_\_\_\_\_, and made a part hereof.

\*\*Authorized person(s)

Dated 6/3/24

  
\_\_\_\_\_  
(Signature of authorized person)

**Jason Brewer**

\_\_\_\_\_  
(Type or print name of authorized person)

  
\_\_\_\_\_  
(Signature of authorized person)

**Christina Brewer**

\_\_\_\_\_  
(Type or print name 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  
Telephone Inquiries: (207) 624-7752**

Email Inquiries: [CEC.Corporations@Maine.gov](mailto:CEC.Corporations@Maine.gov)

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