



# **STANDARD: NON-DISCHARGE** **AQUACULTURE LEASE APPLICATION**



## **CONVERSION APPLICATION**

**Application Description:** This is an application form to convert an existing non-discharge experimental lease to a non-discharge standard lease. This form and the associated application process can only be used if you are not making any changes to what was permitted as part of the experimental lease. This form is submitted after a pre-application meeting as the draft application and is used to help inform the scoping session. This form requires you to provide information about your existing lease operations and other supporting documents. This form is also submitted after the scoping session as the final application.

**Application Instructions:** Before you apply, please review the application instructions hosted on the Department of Marine Resources (DMR)'s website (see link below).

### **REMINDER:**

- Please review the lease application instructions at the link below prior to filling out this form! The instructions also contain important information about the application process.
- Failure to follow the instructions will result in processing delays.

<https://www.maine.gov/dmr/aquaculture/applications-and-forms/standard-lease-applications-and-forms>

**U.S. Army Corps of Engineers (USACE):** You may also need a permit from the USACE. DMR and USACE review processes are separate. You are solely responsible for managing the USACE permitting process. All requests regarding USACE permitting should be made through <https://rrs.usace.army.mil/rrs>

### **Fee Schedule:**

- **Draft Application Fee:** Prior to holding a scoping session, lease conversion applicants must submit a draft application to DMR with a **non-refundable \$500 fee**.
  - **Late Fees:** In accordance with 12 M.R.S.A §6072-A(20-A), if the draft application to convert a lease under 12 M.R.S.A §6072 (12-D), is received after the expiration of the experimental lease but within 30 days of the date of expiration, the draft application must include a non-refundable \$500 late fee. The late fee may be waived if a substantial illness or medical condition prevented the leaseholder from submitting the application prior to the date of expiration. Requests for a medical waiver must include documentation from a physician describing the substantial illness or medical condition.
- **Final Application Fee:** After holding a scoping session, lease conversion applicants must submit a final application to DMR with a **non-refundable \$1,000 fee**.

**Application Submission:** Paper applications can be submitted via mail or email. Application fees

can be paid online using PayMaine via credit card or ACH debit (checking and savings). When the application is received, DMR will email the applicant with further instruction regarding payment. Do not include credit card information with the submission as this is sensitive financial information. If paying the application fee via paper check, you must mail the application to DMR with the check. The check must be made payable to *Treasurer State of Maine*. Failure to include the paper check will result in the application being mailed back to you. Applications are not reviewed until payment is received. If you wish to confirm delivery of your application, use a service with tracking. DMR will email applicants once the proposal is received to confirm receipt.

| If sending via U.S. Post Office:                                                                                    | If sending via email:                                                  | If sending by FedEx, UPS or other overnight service:                                                    |
|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| DEPARTMENT OF MARINE RESOURCES<br>ATTN: Aquaculture Division<br>21 State House Station<br>Augusta, Maine 04333-0021 | <a href="mailto:DMRAquaculture@maine.gov">DMRAquaculture@maine.gov</a> | DEPARTMENT OF MARINE RESOURCES<br>ATTN: Aquaculture Division<br>32 Blossom Lane<br>Augusta, Maine 04333 |

**DMR Communication and Response:** Email is the method of contact DMR will utilize to communicate with you about the application. Please monitor your email and provide the requested information in a timely manner. If you require special accommodation, please call 207-350-7815.

**Third-Party Correspondence:** Some applicants may have a third-party assist them in the application on their behalf and communicate with DMR about the status of the proposal, revisions, etc. In those cases, you will be required to complete a communication consent form. Please complete the consent form posted on the aquaculture website at the link below and include it with your application.

<https://www.maine.gov/dmr/aquaculture/resources-for-growers>

## **STANDARD LEASE CONVERSION APPLICATION: NON-DISCHARGE**

This application is to convert an existing experimental lease to a standard lease. The site currently exists, and the conversion process prohibits the applicant from making changes to what is currently authorized. Since changes cannot be made during this process, please refer to the experimental lease decision for a description of the site and what is currently authorized. Lease decisions are available at the link below. The holder will be required to hold a scoping session on this conversion request. Members of the public are encouraged to review this application prior to the scoping session, so they can provide feedback to the applicant. The applicant will eventually be required to submit a final application to the Department, which will be subject to a comment period and possible public hearing.

Additional information about the leasing process including copies of lease decisions is available at: <https://www.maine.gov/dmr/aquaculture>

### **1. APPLICANT INFORMATION**

#### **A. CONTACT PERSON**

|                                 |  |
|---------------------------------|--|
| <b>Name of Lease Holder(s):</b> |  |
| <b>Contact Person:</b>          |  |
| <b>Email:</b>                   |  |
| <b>Telephone:</b>               |  |

#### **B. MAILING ADDRESS**

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

#### **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 type="checkbox"/> Paper Check | <input type="checkbox"/> Credit Card/ACH Debit |
|--------------------------------------|------------------------------------------------|

**E. APPLICATION TYPE**

|                                            |                                            |
|--------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Draft Application | <input type="checkbox"/> Final Application |
|--------------------------------------------|--------------------------------------------|

**F. PRE-APPLICATION MEETING**

|                                   |  |
|-----------------------------------|--|
| <b>Date the meeting was held:</b> |  |
|-----------------------------------|--|

**G. SCOPING SESSION**

|                                   |  |
|-----------------------------------|--|
| <b>Date scoping session held:</b> |  |
|-----------------------------------|--|

**2. PROPOSAL INFORMATION****A. LEASE INFORMATION**

|                                    |  |
|------------------------------------|--|
| <b>Experimental Lease Site ID:</b> |  |
| <b>Town where site is located:</b> |  |
| <b>Lease Term Requested:</b>       |  |

**B. INTERTIDAL SITE**

|                                                               |                                                          |
|---------------------------------------------------------------|----------------------------------------------------------|
| <b>Is any portion of the lease site above mean low water?</b> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---------------------------------------------------------------|----------------------------------------------------------|

### 3. WATER QUALITY

#### A. GROWING AREA CLASSIFICATION

|                                                                                                                                                                                                              |                                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Growing Area Designation</b>                                                                                                                                                                              |                                                                                                                                                                                                                         |
| <b>Growing Area Classification</b>                                                                                                                                                                           | <input type="checkbox"/> Approved<br><input type="checkbox"/> Conditionally Approved<br><input type="checkbox"/> Restricted<br><input type="checkbox"/> Conditionally Restricted<br><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> |                                                                                                                                                                                                                         |

#### B. BIRD DETERRENTS

**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:**

|  |
|--|
|  |
|--|

### 4. OPERATIONS

#### A. OTHER AQUACULTURE SITES

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

|                                                                                 |  |
|---------------------------------------------------------------------------------|--|
| <b>Are there any LPA licenses within the boundaries of the site?</b>            |  |
| <b>If yes, provide the LPA site ID(s)</b>                                       |  |
| <b>Are there any LPA sites within 1,000 feet of the boundaries of the site?</b> |  |
| <b>If yes, provide the LPA site ID(s)</b>                                       |  |

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

|                                                                                               |  |
|-----------------------------------------------------------------------------------------------|--|
| <b>Is there any other experimental lease within 1,000 feet of the boundaries of the site?</b> |  |
| <b>If yes, provide the experimental lease site ID</b>                                         |  |

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

|                                                                                   |  |
|-----------------------------------------------------------------------------------|--|
| <b>Is there a standard lease within 1,000 feet of the boundaries of the site?</b> |  |
| <b>If yes, provide the standard lease site ID</b>                                 |  |

**B. TECHNICAL CAPABILITY**

| <b>Does the holder(s) of this site hold any other existing aquaculture sites?</b>                                             |                                                                                                            | <input 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> |                                                                                                            |                                                          |                                                                             |
| <b>Name of Holder</b>                                                                                                         | <b>Type of Site</b>                                                                                        | <b>Site ID</b>                                           | <b>Acreage (if a lease)<br/><i>Do not provide a size for LPA sites.</i></b> |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |
|                                                                                                                               | <input type="checkbox"/> Experimental<br><input type="checkbox"/> Standard<br><input type="checkbox"/> LPA |                                                          |                                                                             |

|                                                               |
|---------------------------------------------------------------|
| <b>List your skills and experiences working on the water:</b> |
|                                                               |

### C. COMPLIANCE HISTORY

|                                                                                                             |                                                          |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>Have you been convicted of violating any state or federal marine resource laws?</b>                      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Have you been adjudicated to be responsible for violating any state or federal marine resource laws?</b> | <input type="checkbox"/> Yes <input type="checkbox"/> No |

### D. FINANCIAL ESTIMATES

|                                                                                                                                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------|--|
| Use the space below to provide requested cost estimates of the aquaculture activities, if approved, as they relate to this proposal. |  |
| <b>Annual Lease Rent</b>                                                                                                             |  |
| <b>Annual DMR Licensing Fees</b>                                                                                                     |  |
| <b>Annual cost to maintain the bond or commitment amount for the escrow account</b>                                                  |  |
| <b>Annual Equipment Costs</b>                                                                                                        |  |
| <b>Annual Maintenance Costs</b>                                                                                                      |  |

## 5. RIPARIAN OWNER NOTIFICATION

|                                                                                                                                                                  |                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>Is the site 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 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> |  |
|------------------------------|--|

| Tax Map Number | Lot Number | Name of Landowner(s) | Mailing Address<br>(based on municipal tax records) |
|----------------|------------|----------------------|-----------------------------------------------------|
|                |            |                      |                                                     |
|                |            |                      |                                                     |
|                |            |                      |                                                     |
|                |            |                      |                                                     |
|                |            |                      |                                                     |
|                |            |                      |                                                     |

### 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.

|                      |                                                                                                                                             |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Printed Name:</b> |                                                                                                                                             |
| <b>Signature:</b>    |                                                                                                                                             |
| <b>Position:</b>     | <input type="checkbox"/> Town Clerk <input type="checkbox"/> Town Assessor<br><input type="checkbox"/> Other town official. Please specify: |
| <b>Date:</b>         |                                                                                                                                             |

## 6. OTHER ATTACHMENTS

### FINANCIAL INSTITUTION LETTERS

☐ In accordance with regulation, you must include a letter from a financial institution indicating you have an account in good standing. Each lease holder must provide a letter.

### INTERTIDAL SITES

If any portion of the 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:**

|                                                                                                          |                                                          |
|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 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 officers** need to consent to using the intertidal area. Consent means that a majority of the municipal officers 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 officers 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 officer (they need to be individually named).
- ☐ Name and title of the individual submitting the letter on behalf of the town.

## 7. ACKNOWLEDGEMENT AND SIGNATURE PAGE

Every listed lease holder needs to complete and include a copy of this form with the submission. If the holder 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 each 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 authorized. If the application is denied, I am responsible for removing all gear, including moorings, in accordance with the law.

☐ 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.

☐ I understand that I cannot make any changes to what was originally authorized except that I may be required by the DMR to modify aspects of operations related to light, noise, or visual impacts to comply with associated mitigation requirements.

|                     |  |
|---------------------|--|
| <b>Printed Name</b> |  |
| <b>Signature</b>    |  |
| <b>Date</b>         |  |