

Deemed Complete - 07.09.2026

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

Legal Name of Applicant(s):	
Contact Person:	
Email:	
Telephone:	

B. MAILING ADDRESS

Street Address:	
City:	
State:	
Zip Code:	

C. PHYSICAL ADDRESS☐ Same as mailing address

Street Address:	
City:	
State:	
Zip Code:	

D. PAYMENT METHOD

☐ Check ☐ Credit Card

E. PRE-APPLICATION MEETING

Date the meeting was held:	
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F. PENDING APPLICATIONS

How many pending experimental lease applications (including this one) do you have pending?	☐ One (1) ☐ Two (2) <i>Note: An applicant may have no more than two pending experimental leases at any time.</i>
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):	

2. PROPOSAL INFORMATION**A. LOCATION OF PROPOSED LEASE SITE**

Town:	
County:	
Waterbody:	
General Description:	

B. PROPOSED LEASE INFORMATION

Total Acreage Requested:	
Lease Term Requested:	
Type of Culture: (Check all that apply)	☐ Suspended (gear in the water and/or on the bottom) ☐ Bottom (no gear)

C. INTERTIDAL SITE

Is any portion of the proposed lease site above mean low water?	☐ Yes ☐ No
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If you checked 'yes' you will need to complete section 11(J) of this application.

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.

A. Is the proposed lease site located within any of the following habitat designations/areas? Check all that apply.

- ☐ Essential Habitat (includes Roseate Tern habitat and Piping Plover/Least Tern habitat)
- ☐ Shorebird Area
- ☐ Tidal Waterfowl and Wading Bird Habitat

B. Provide the water depth at mean high water.

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C. Provide the water depth at mean low water.

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D. Are you proposing to use any suspended gear?

- ☐ Yes ☐ No

If yes, will the gear be submerged (below the surface of the water) at all tidal stages?

- ☐ Yes ☐ No

E. Are you proposing predator netting?

- ☐ Yes ☐ No

If yes, what is the mesh size?

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If yes, what is the twine size?

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F. Is the proposal within 1,000 feet of any of the following? Check all that apply. If you select one or more boxes you also need to provide the requested information that follows.

- ☐ Docking facility owned by federal, state, or municipal governments
- ☐ Beach owned by federal, state, or municipal governments

Provide the name of the docking facility and/or beach:

--

Proximity of the respective property to the proposed lease site in feet:

--

Select which level of government owns the respective property:	
☐ Federal ☐ State ☐ Municipal	
Provide the name of the government entity that owns the respective property:	

G. Is any portion of the proposal within a marked navigational channel?	
☐ Yes ☐ No	
If no, how far is the proposal from the nearest marked navigational channel? Provide the distance in feet.	

H. Is the proposed site within 1,000 feet of any federal navigation project or anchorage?	
☐ Yes ☐ No	
If yes, identify the project or anchorage:	

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

A. Describe the observed bottom characteristics of the proposed lease site:	
Date of Observation:	
B. Provide the speed of current:	
Date of Observation:	
C. Provide the direction of current:	
Date of Observation:	
D. Describe the fauna (animals) you have observed in the area:	
Date of Observation:	
E. Describe the flora (plants) you have observed in the area:	
Date of Observation:	

F. Have you observed eelgrass within the boundaries of the proposed site?	☐ Yes ☐ No
Date of Observation:	
Method of Observation:	
G. Have you observed eelgrass within 1,000 feet of the proposed site?	☐ Yes ☐ No
Date of Observation:	
Method of Observation:	

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.

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.				
2.				
3.				
4.				
5.				
6.				

	Common Name	Latin Name	Name of Source	Stocking Density
7.	AMERICAN/ EASTERN OYSTERS	C. VIRGINICA	DOWNEAST INSTITUTE	1,000,000
8.				
9.				

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.						
2.						
3.						
4.						
5.						
6.						

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.					
2.					
3.					
4.					
5.					
6.					

6. PROPOSED OPERATIONS

A. CULTIVATION METHODS AND GEAR

1. How will you culture marine organisms?	☐ Gear ☐ Bottom planting only (no gear proposed) ☐ 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

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

List all species that would be free planted	
Describe the areas of the proposed site where free planting would occur. If it is the entire site, specify accordingly.	

4. On Site Activity

At maximum capacity, which days of the week do you anticipate being on the site?	
At maximum capacity, what is the earliest time of day you would start work on the site?	
At maximum capacity, what is the latest time you would end work on the site?	
What months will seeding occur?	
What is the maximum number of days it will take to seed the site?	
Describe tending and maintenance activities:	
What months will harvesting occur?	
How will you harvest each species? If you are using a drag, provide the dimensions.	

5. Seasonality

Are there any seasonal changes to gear deployment?	☐ Yes ☐ No
If yes, please describe:	

B. MOTORIZED EQUIPMENT AND LIGHTING

1. Are you proposing to use motorized equipment on the proposed lease?	☐ Yes ☐ No
2. Are any of the noise sources fixed?	☐ Yes ☐ No
3. If yes, describe your plan to direct the noise from residences or areas of routine use on adjacent land:	
4. Does any of the equipment contain exterior lighting?	☐ Yes ☐ No
5. Describe the measures taken to ensure that exterior lighting on the equipment only illuminates the target area and reduces glare:	
6. Describe the measures taken to mitigate light impacts from equipment:	
7. Are you proposing to use a generator?	☐ Yes ☐ No
8. What is the generator used for?	
9. What type of fuel does the generator take?	☐ Gasoline ☐ Diesel ☐ Other. Please specify:

10. Which months would you use the generator? If year-round, specify accordingly.	
11. What is the maximum number of days the generator would be used each year?	
12. Which days of the week will the generator be used?	
13. What are the maximum hours a day the generator would be used?	
14. Do you intend to use a generator designed to mitigate noise?	☐ Yes ☐ No
15. What measures will you take to mitigate noise from the generator?	

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	
What is the piece of equipment used for?	
Select the color(s) of this piece of equipment.	☐ Grays ☐ Blacks ☐ Browns ☐ Blues ☐ Greens ☐ Other Please specify:

Does the piece of equipment have any exterior lights?	☐ Yes ☐ No
How is this piece of equipment powered?	
Which months would this piece of motorized equipment be used? If year round, specify accordingly.	
What is the maximum number of days that this piece of motorized equipment would be used?	
Which days of the week would this of motorized equipment be used?	
What are the maximum hours a day that this piece of motorized equipment would be used?	
What measures would be taken to mitigate noise from this piece of equipment?	
2. Equipment Name	
What is the equipment used for?	
Select the color(s) of this piece of equipment.	☐ Grays ☐ Blacks ☐ Browns ☐ Blues ☐ Greens ☐ Other Please specify:
Does the piece of equipment have any exterior lights?	☐ Yes ☐ No
How is this piece of equipment powered?	
Which months would this piece of motorized	

equipment be used? If year round, specify accordingly.	
What is the maximum number of days that this piece of motorized equipment would be used?	
Which days of the week would this of motorized equipment be used?	
What are the maximum hours a day that this piece of motorized equipment would be used?	
What measures would be taken to mitigate noise from this piece of equipment?	
3. Equipment Name	
What is the equipment used for?	
Select the color(s) of this piece of equipment.	☐ Grays ☐ Blacks ☐ Browns ☐ Blues ☐ Greens ☐ Other Please specify:
Does this piece of equipment have any exterior lights?	☐ Yes ☐ No
How is this piece of equipment powered?	
Which months would this piece of motorized equipment be used? If year round, specify accordingly.	
What is the maximum number of days that this piece of motorized equipment would be used?	
Which days of the week would this of motorized equipment be used?	
What are the maximum hours a day that this piece of motorized equipment would be	

used?	
What measures would be taken to mitigate noise from this piece of equipment?	The noise generating equipment will be on the work float located on the western side of the proposed site, furthest away from the closest observed residences (~2,200 ft away)

C. FLOATING STRUCTURES

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

D. BUILDINGS

1. Are you proposing a shed, building or other similar structure?	☐ Yes ☐ No
If yes, what is the building, shed, or similar	

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

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?
1.						
2.						
3.						
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: MPOC is approved for seasonal floats through the Town of Brunswick. Once built, some vessels will be docked at 1000 Mere Point Road.

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):	Year(s):
2. What types of commercial vessels did you observe navigating in the area?	
3. What was the approximate length of the commercial vessels you observed?	
4. How many commercial vessels did you observe navigating in the area?	
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:	

6. What is the typical direction of commercial vessel traffic?

B. RECREATIONAL NAVIGATION

1. When did you complete your observations of recreational vessel navigation in the area? Include the month(s) and year(s).	
Month(s):	Year(s):
2. What types of recreational vessels did you observe navigating in the area?	
3. What were the approximate size of the recreational vessels you observed?	
4. How many recreational vessels did you observe navigating in the area?	
5. Did any recreational vessels transit through the boundaries of the proposed site?	
☐ Yes ☐ No If yes, how many recreational vessels transited through the boundaries:	
6. What is the typical direction of recreational vessel traffic?	

C. MOORINGS

1. When did you complete your observations of moorings in the area? Include the month(s) and year(s).	
Month(s):	Year(s):
2. Are there any moorings within the vicinity of the proposed lease site?	☐ Yes ☐ No
3. How many moorings are within 1,000 feet of the proposed site?	
4. What type of vessels utilize the moorings? Check all that apply.	☐ Commercial ☐ Recreational
5. What is the distance (in feet) from the	

proposed lease site to the closest observed mooring?	
6. What is the length (in feet) of the vessel that utilizes this mooring?	

D. COMMERCIAL FISHING

1. When did you complete your observations of commercial fishing in the area? Include the month(s) and year(s).	
Month(s):	Year(s):
The following questions are specific to commercial fishing that may occur within the boundaries of the proposed site.	
2. Does any commercial fishing occur within the boundaries of the proposed site?	☐ Yes ☐ No
3. List the type of commercial fishing that occurs within the boundaries of the proposed site.	
4. What months does commercial fishing activity occur within the boundaries of the proposed site?	
5. How many people commercially fish within the boundaries of the proposed lease area?	
The following questions are specific to commercial fishing that may occur within the vicinity of the proposed site.	
6. Does any commercial fishing occur within the vicinity of the proposed site?	☐ Yes ☐ No
7. List the type of commercial fishing that occurs within the vicinity of the proposed site.	
8. What months does commercial fishing activity occur within the vicinity of the proposed site?	
9. How many people commercially fish in the vicinity of the proposed site?	

E. RECREATIONAL FISHING

1. When did you complete your observations of recreational fishing in the area? Include the month(s) and year(s).	
Month(s):	Year(s):
The following questions are specific to recreational fishing that may occur within the boundaries of the proposed site.	
2. Does any recreational fishing occur within	☐ Yes ☐ No

the boundaries of the proposed site?	
3. List the type of recreational fishing that occurs within the boundaries of the proposed site.	
4. What months does recreational fishing activity occur within the boundaries of the proposed site?	
5. How many people recreationally fish within the boundaries of the proposed lease area?	
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?	☐ Yes ☐ No
7. List the type of recreational fishing that occurs within the vicinity of the proposed site.	
8. What months does recreational fishing activity occur within the vicinity of the proposed site?	
9. How many people recreationally fish in the vicinity of the proposed site?	

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):	Year(s):
2. Describe the shoreline in the vicinity of the lease proposal.	
3. Have you observed any riparian owned vessel(s) accessing the shoreline?	☐ Yes ☐ No
4. What type of vessel(s) did you observe?	
5. Describe the length (in feet) of the vessel(s).	
6. Describe the surrounding uplands in the vicinity of the lease proposal.	

G. DOCKS

1. Are there any docks in the area?	☐ Yes ☐ No
2. If yes, how many are within 1,000 feet of the proposed site?	
3. Have you observed any vessels accessing or secured to the docks?	☐ Yes ☐ No
4. If yes, what is the length (in feet) of the vessels observed?	
5. What is the distance (in feet) from the proposed lease site to the closest observed dock?	

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
☐ Kayaking			☐ Within the proposal boundaries ☐ Within the vicinity of the proposed site.
☐ Swimming			☐ Within the proposal boundaries ☐ Within the vicinity of the proposed site
☐ Other. Please specify:			☐ Within the proposal boundaries ☐ 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?	
If yes, provide the LPA site ID(s)	
Are there any LPA sites within 1,000 feet of the boundaries of the proposed site?	
If yes, provide the LPA site ID(s)	

2. Experimental Aquaculture Lease(s)

Is any portion of an experimental lease within the boundaries of the proposed site?	
If yes, provide the experimental lease site ID	
Is there an experimental lease within 1,000 feet of the boundaries of the proposed site?	
If yes, provide the experimental lease site ID	

3. Standard Aquaculture Lease(s)

Is any portion of a standard lease within the boundaries of the proposed site?	
If yes, provide the standard lease site ID	
Is there a standard lease within 1,000 feet of the boundaries of the proposed site?	
If yes, provide the standard lease site ID	

8. OPERATIONAL CAPABILITY

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

A. TECHNICAL CAPABILITY

Do you or any other applicant hold existing aquaculture sites?	☐ Yes ☐ No		
If yes, please complete the table below for each aquaculture site held. Please attach additional entries as necessary.			
Name of Holder	Type of Site	Site ID	Acreage (if a lease). Do not provide a size for LPA sites.
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		
	☐ Experimental ☐ Standard ☐ LPA		

List your skills and experiences working on the water:

B. COMPLIANCE HISTORY

Have you been convicted of violating any state or federal marine resource laws?	☐ Yes ☐ No
Have you been adjudicated to be responsible for violating any state or federal marine resource laws?	☐ Yes ☐ No

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.	
Annual Lease Rent	
Annual DMR Licensing Fees	
Annual cost to maintain the bond or commitment amount for the escrow account	
Annual Equipment Costs	
Annual Maintenance Costs	

9. RIPARIAN LANDOWNER NOTIFICATION

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).	☐ Yes ☐ No
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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.

Name of Municipality:	
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Tax Map Number	Lot Number	Name of Landowner(s)	Mailing Address (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.

Printed Name:	
Signature:	
Position:	☐ Town Clerk ☐ Town Assessor ☐ Other town official. Please specify:
Date:	

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.

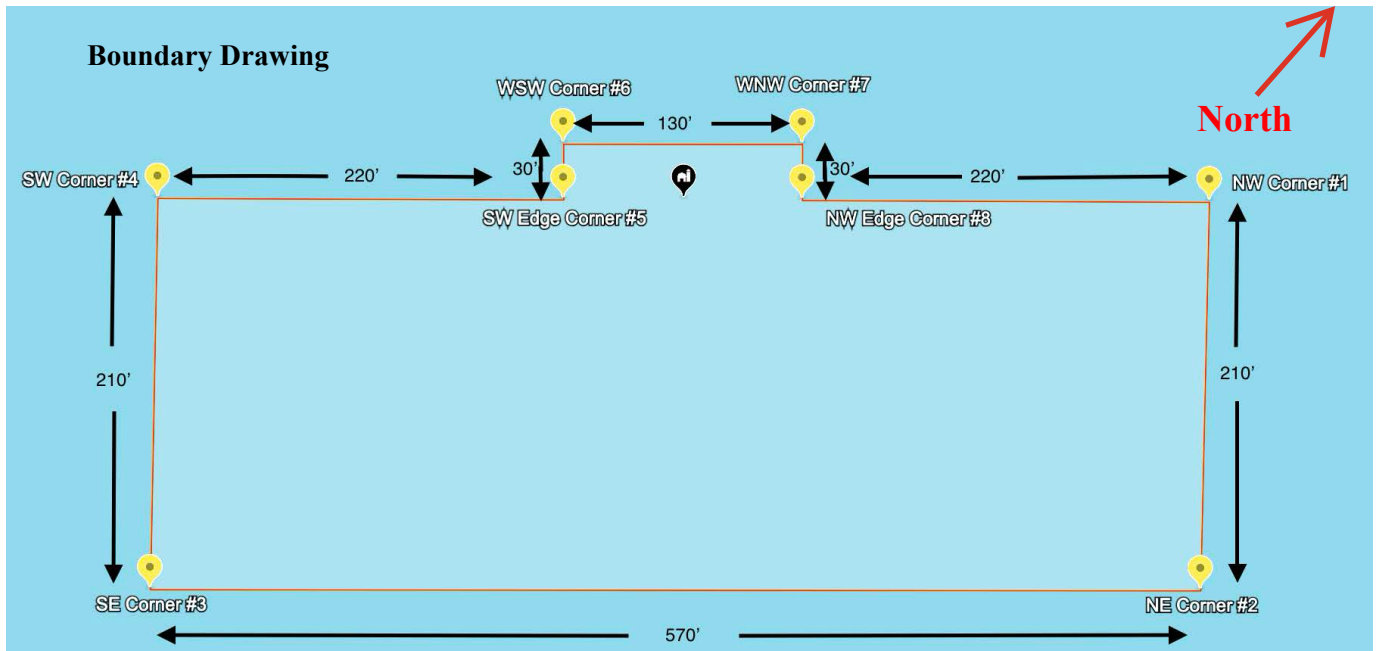
Corner Label	Latitude (N)	Longitude (W)
1 (NW corner)		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

11. RENDERINGS & ATTACHMENTS

SITE LOCATION

A. BOUNDARY DRAWING

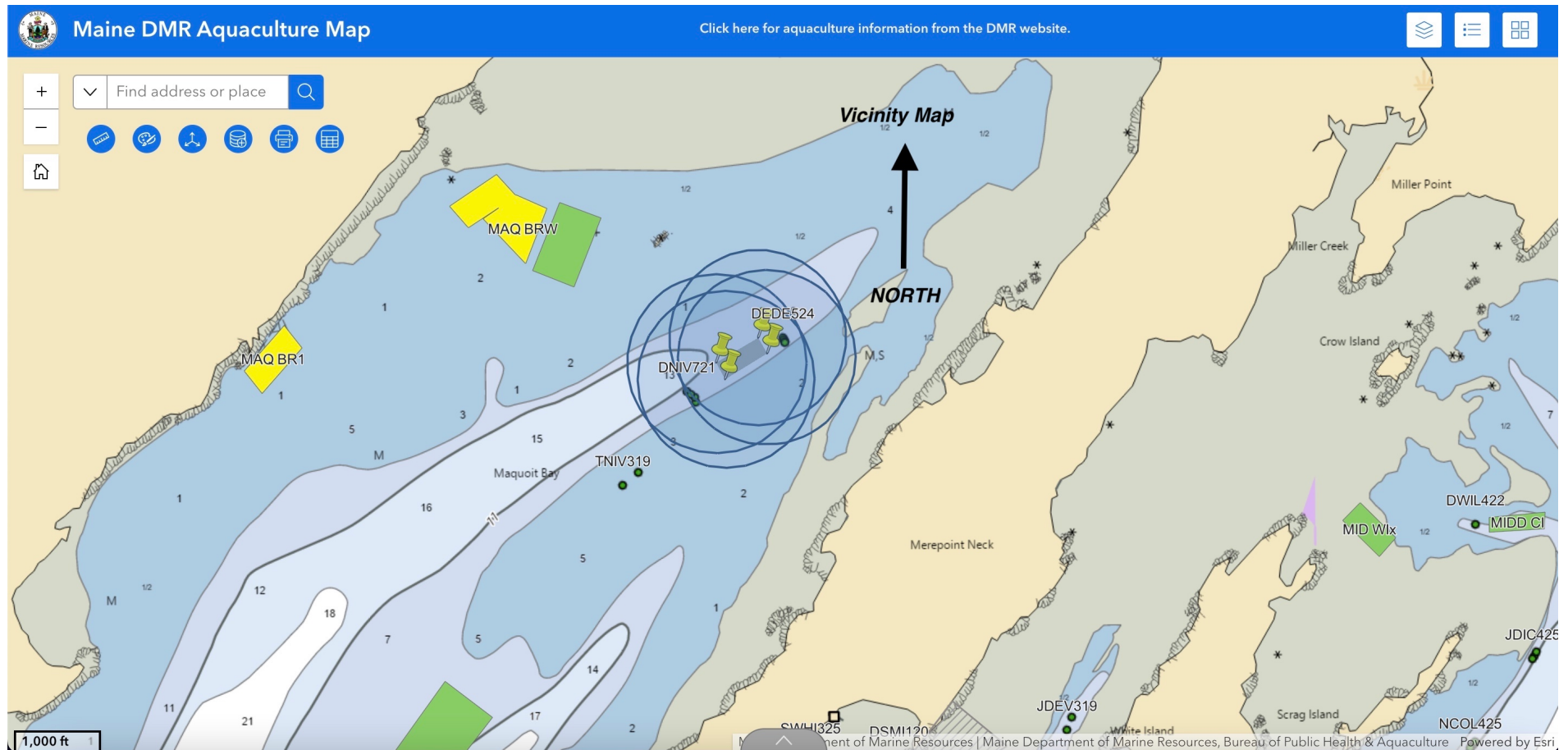
Depict the boundaries of the proposed site with corners labeled as referenced in the site coordinate table. Start with corner 1 (NW corner) and proceed clockwise with the labeling.



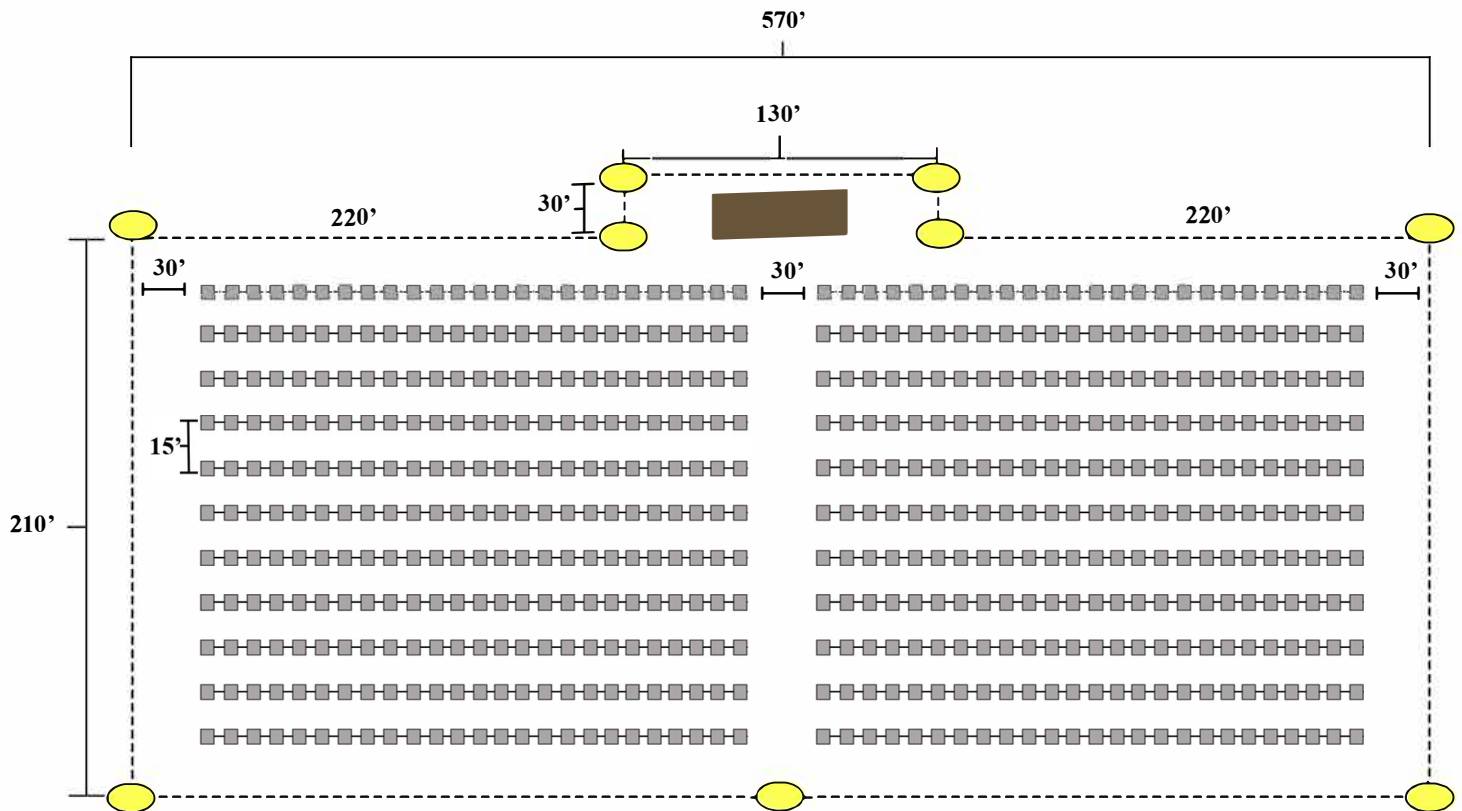
B. VICINITY MAP

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:



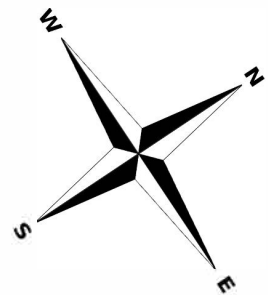
C. Growing Season Overhead View (April - December)



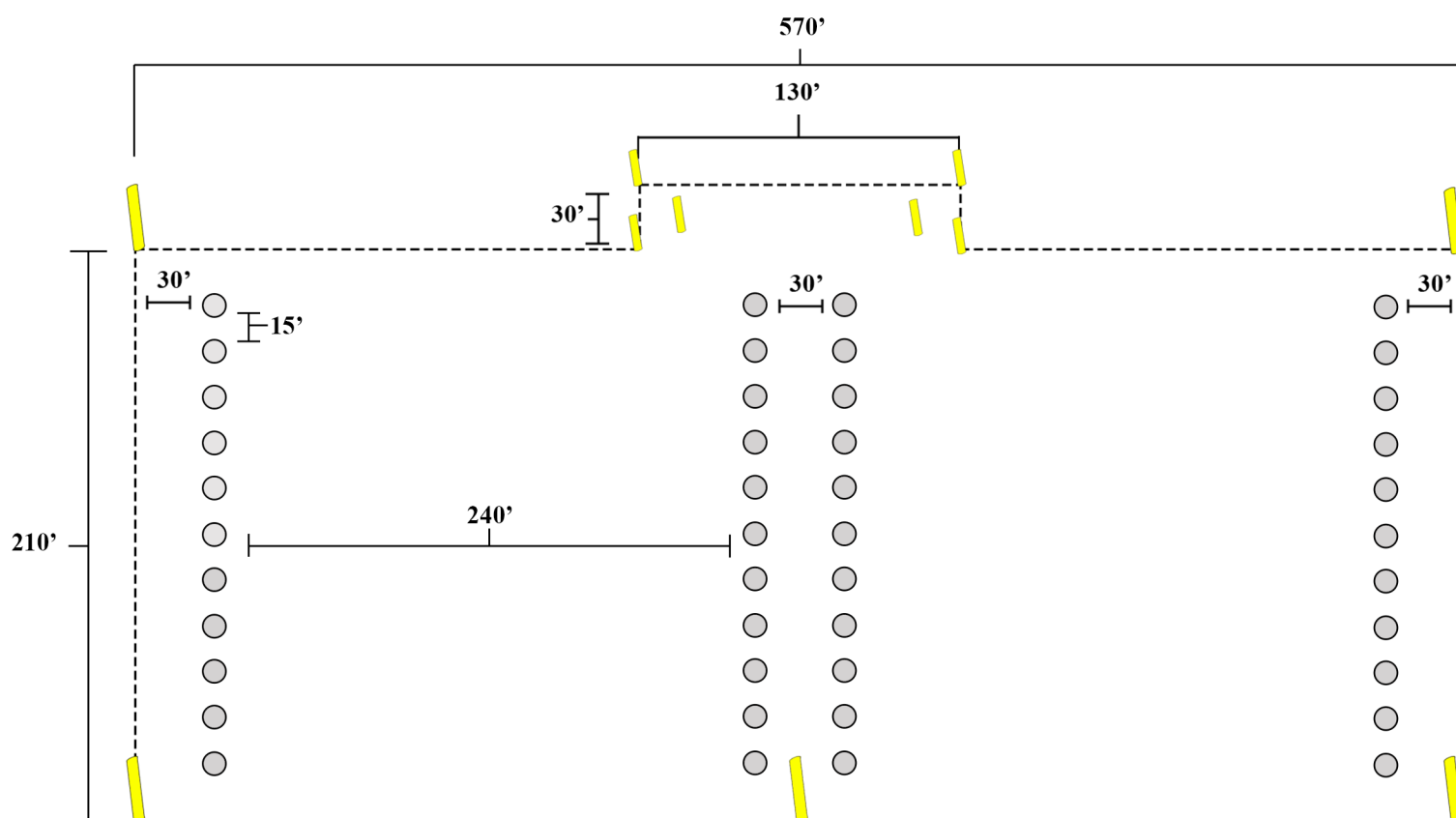
 = Work Float

 = Nav Bouy

 = 1 Floating Cage or 3 Floating Bags



D. Winter Overhead View (January-March)

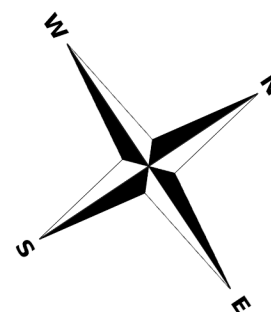


= Winter Stick
(~5' long)

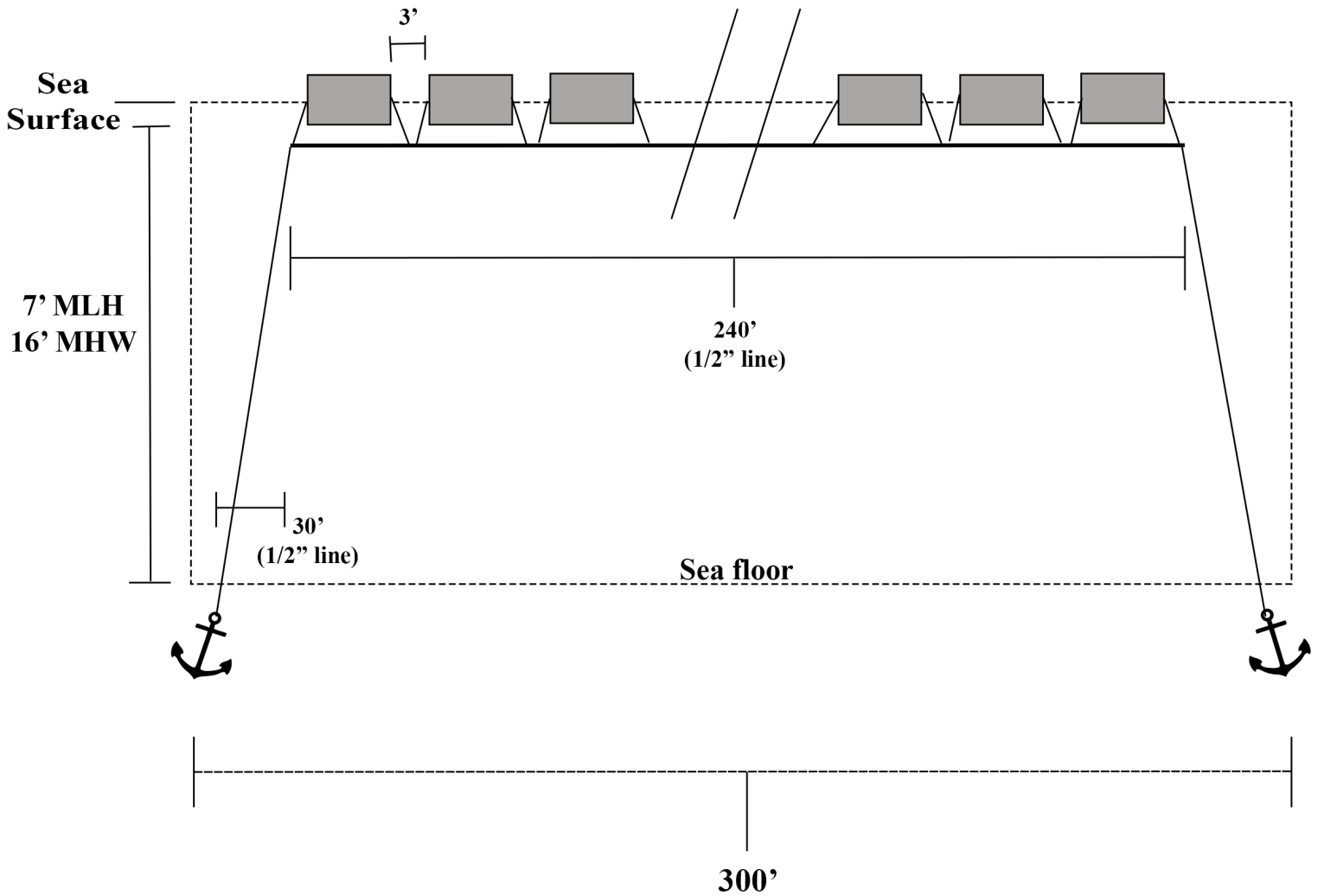


= White Toggle

(11 Winter Sticks
44 Toggles)



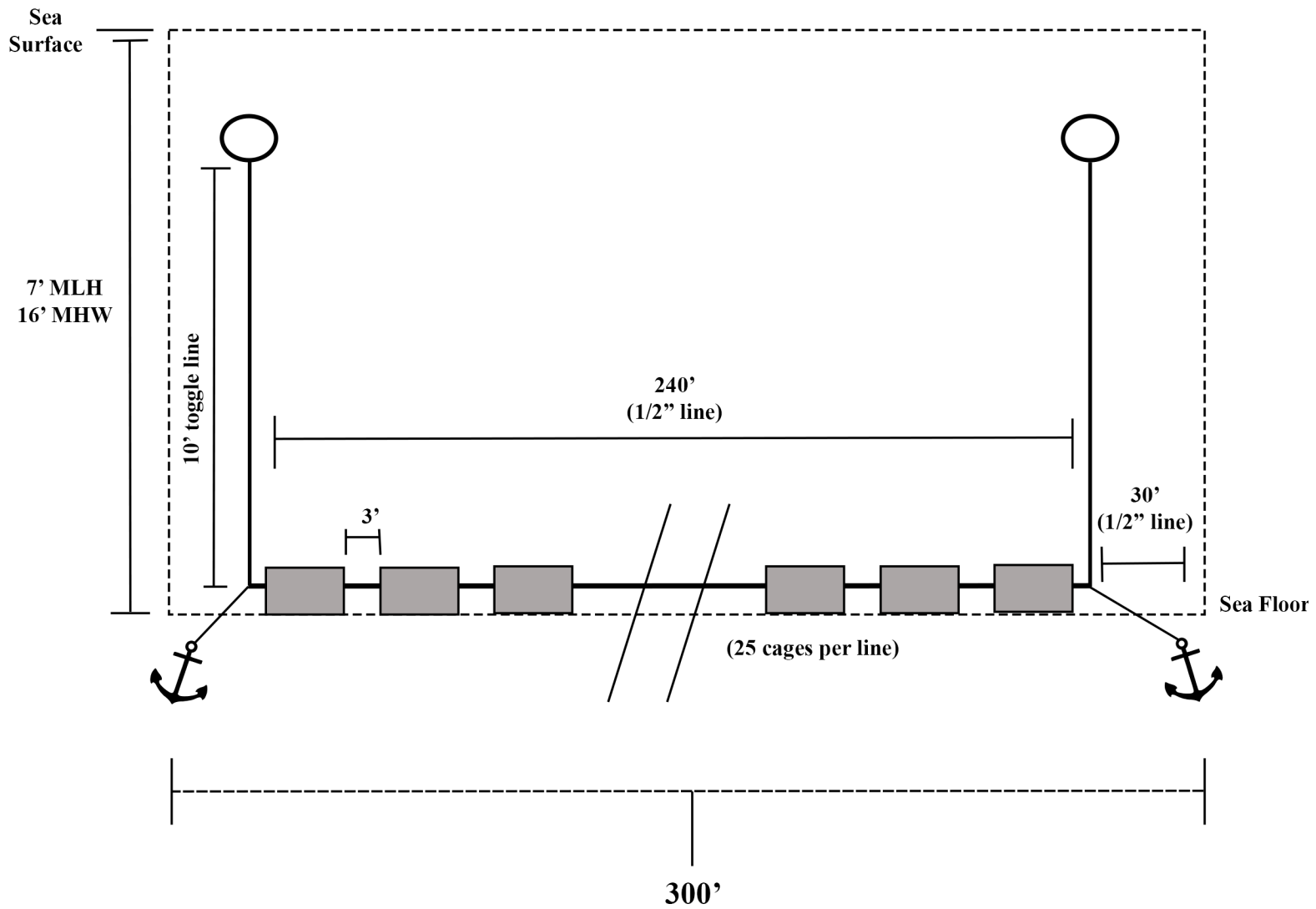
E. Growing Season Cross Section (April-December)



 = Cage

 = Helical Anchor
15'-20' beneath sea floor

F. Winter Cross Section (January-March)



= Cage



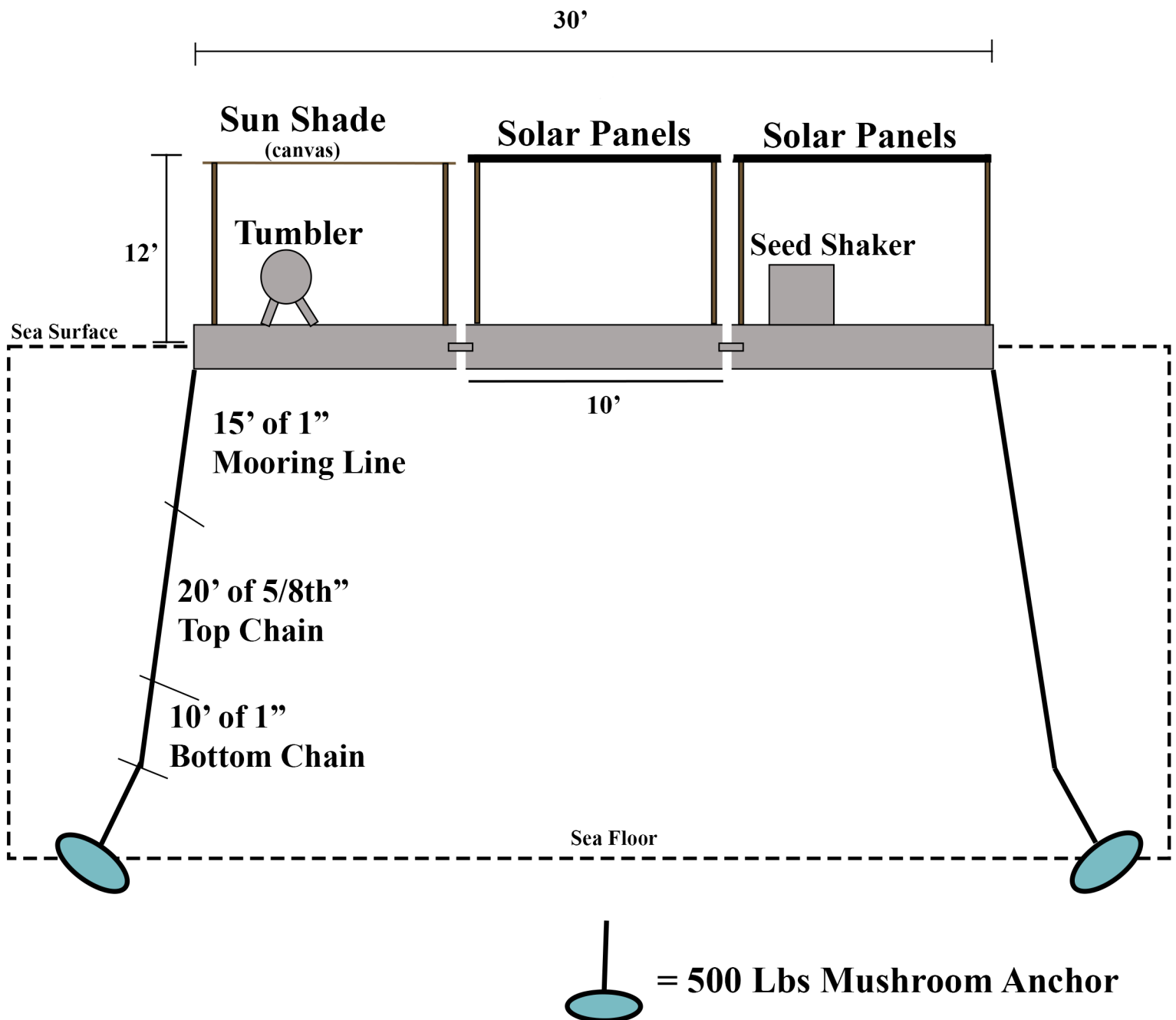
= Helical Anchor

15'-20' beneath sea floor

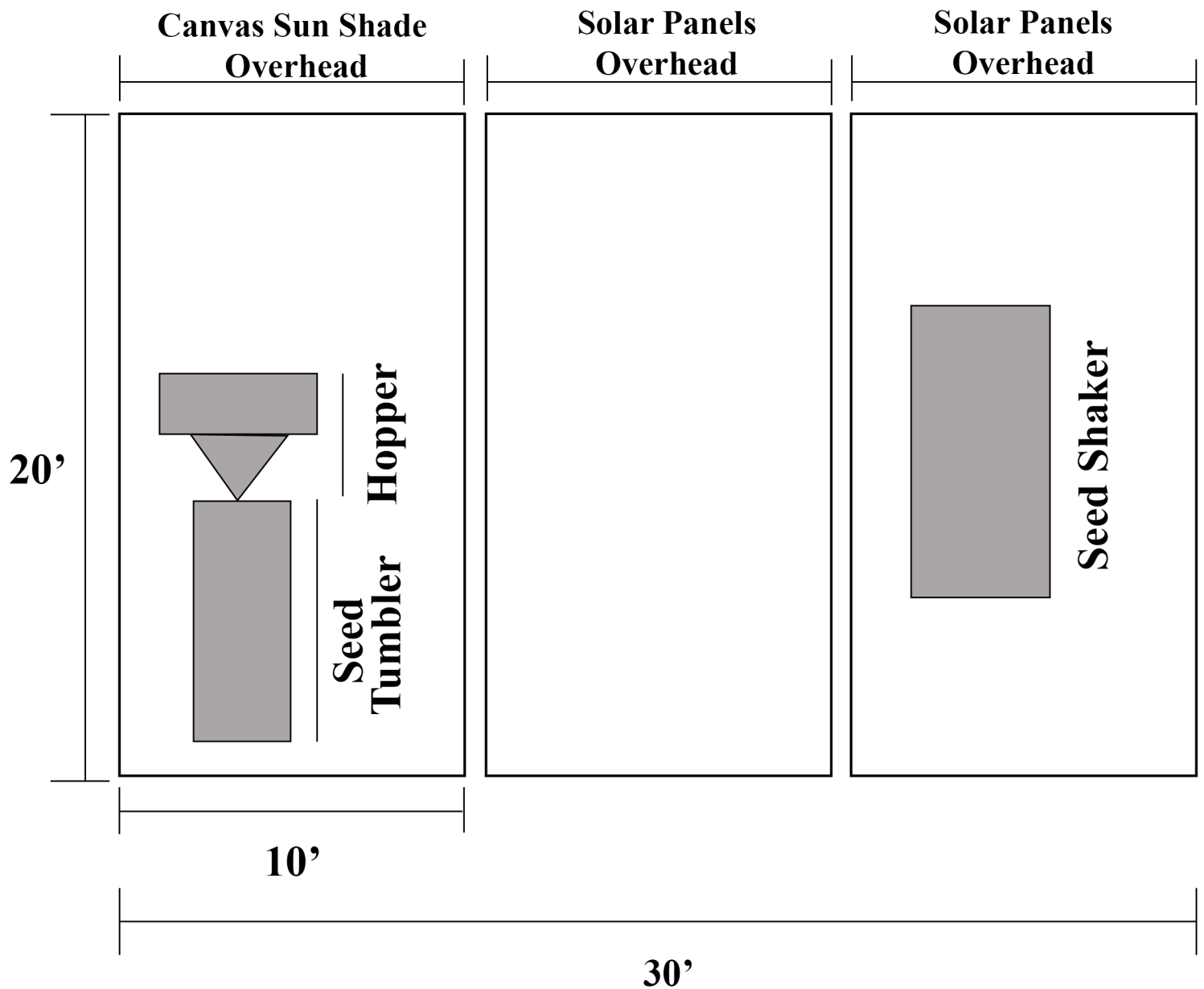


= White Toggle

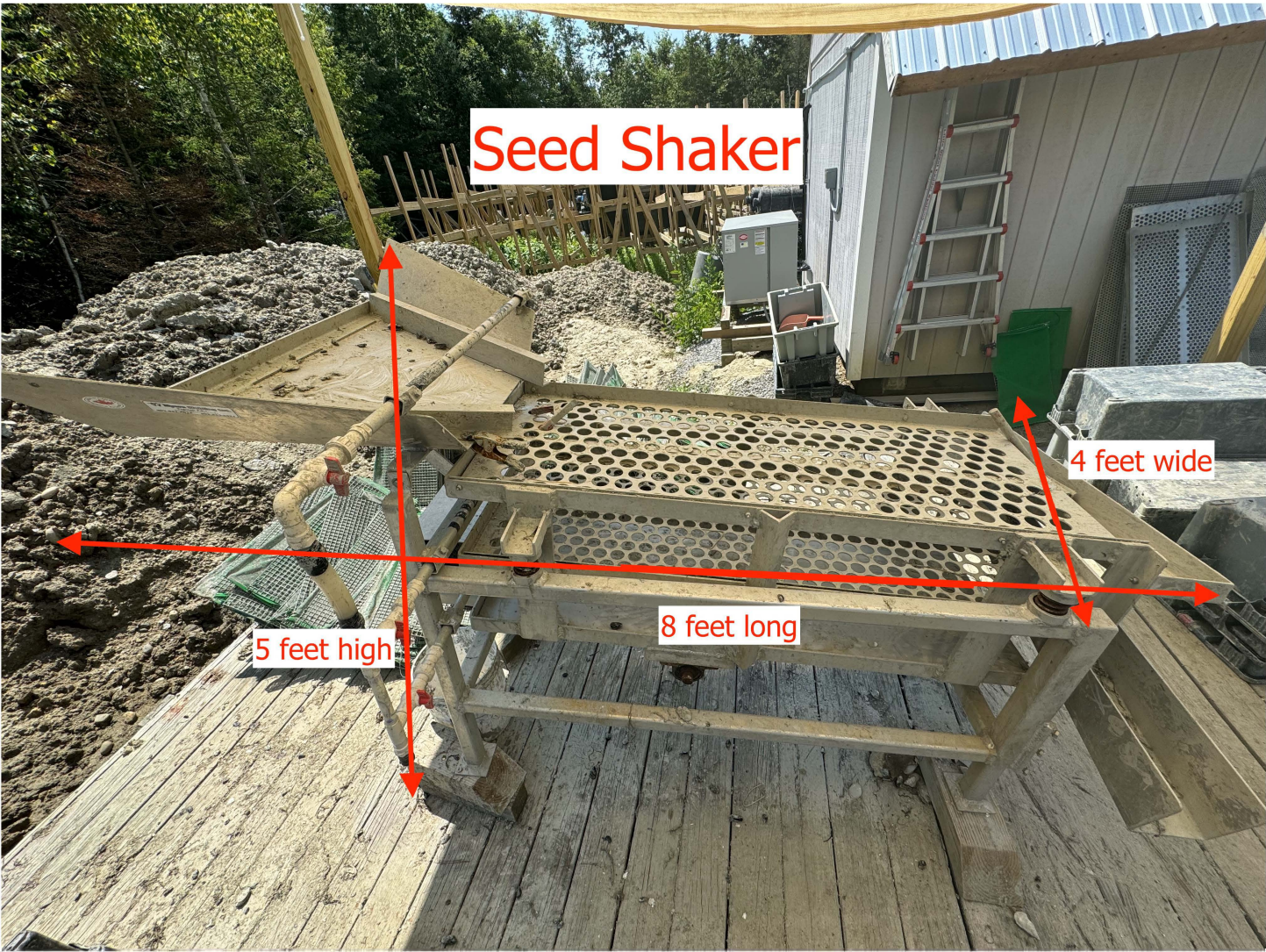
G. Work Float Cross Section View



G. Work Float Overhead View



H. Equipment Layout



H. Equipment Layout



H. Equipment Layout



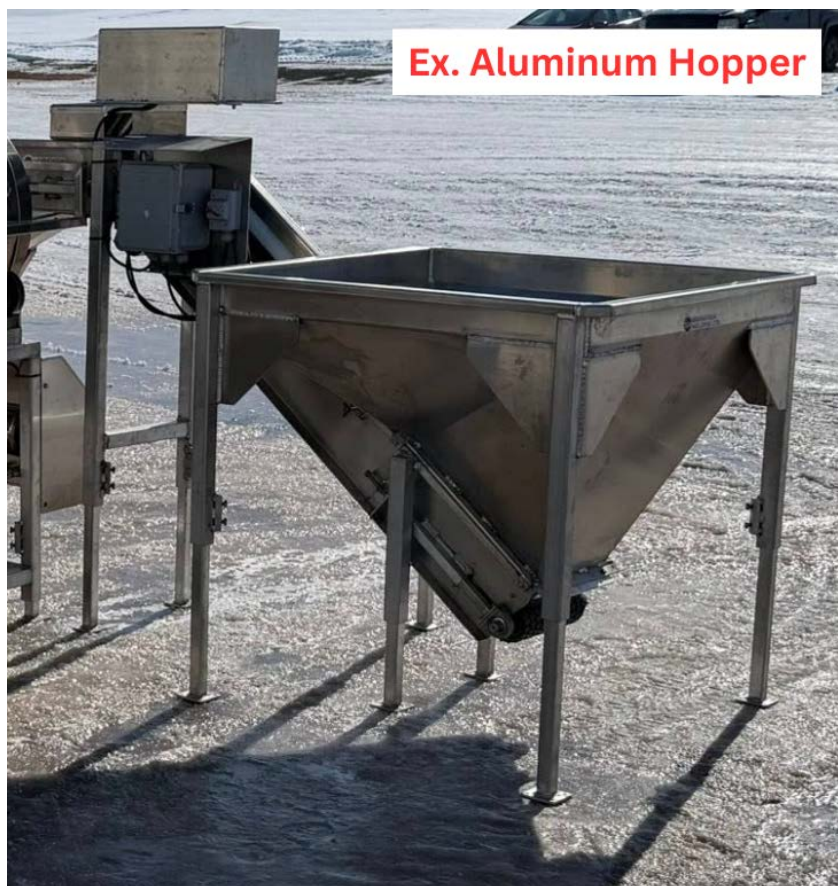
Ex. Aluminum Tumbler/Grader

Total Dimensions (Hopper + Tumbler/Grader)

Length = 16 feet

Height = 6 feet

Width = 5 feet

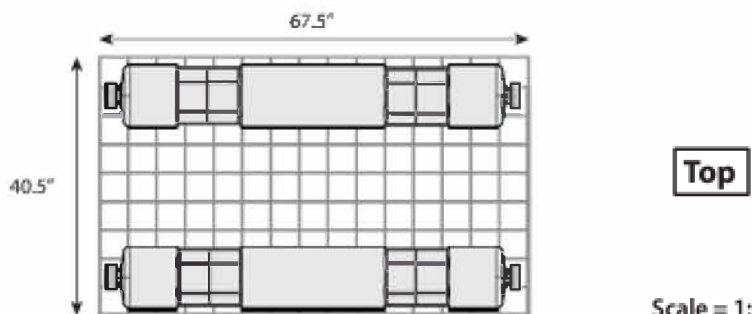
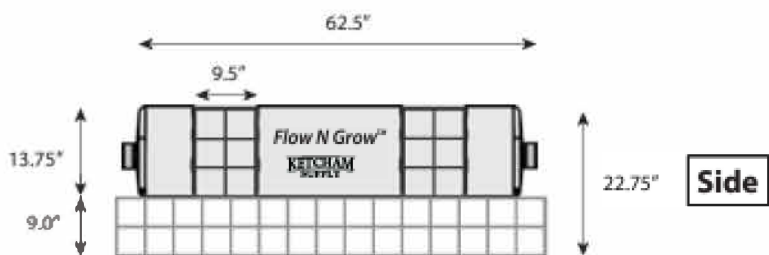
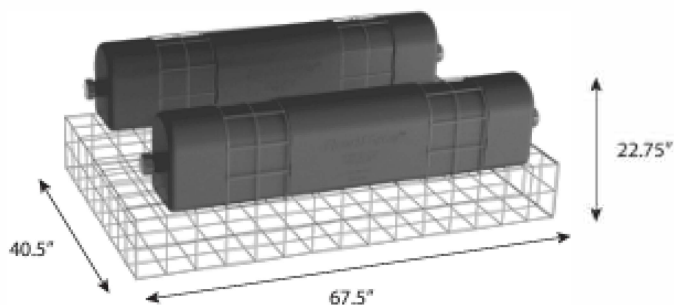


Ex. Aluminum Hopper

H. Equipment Layout



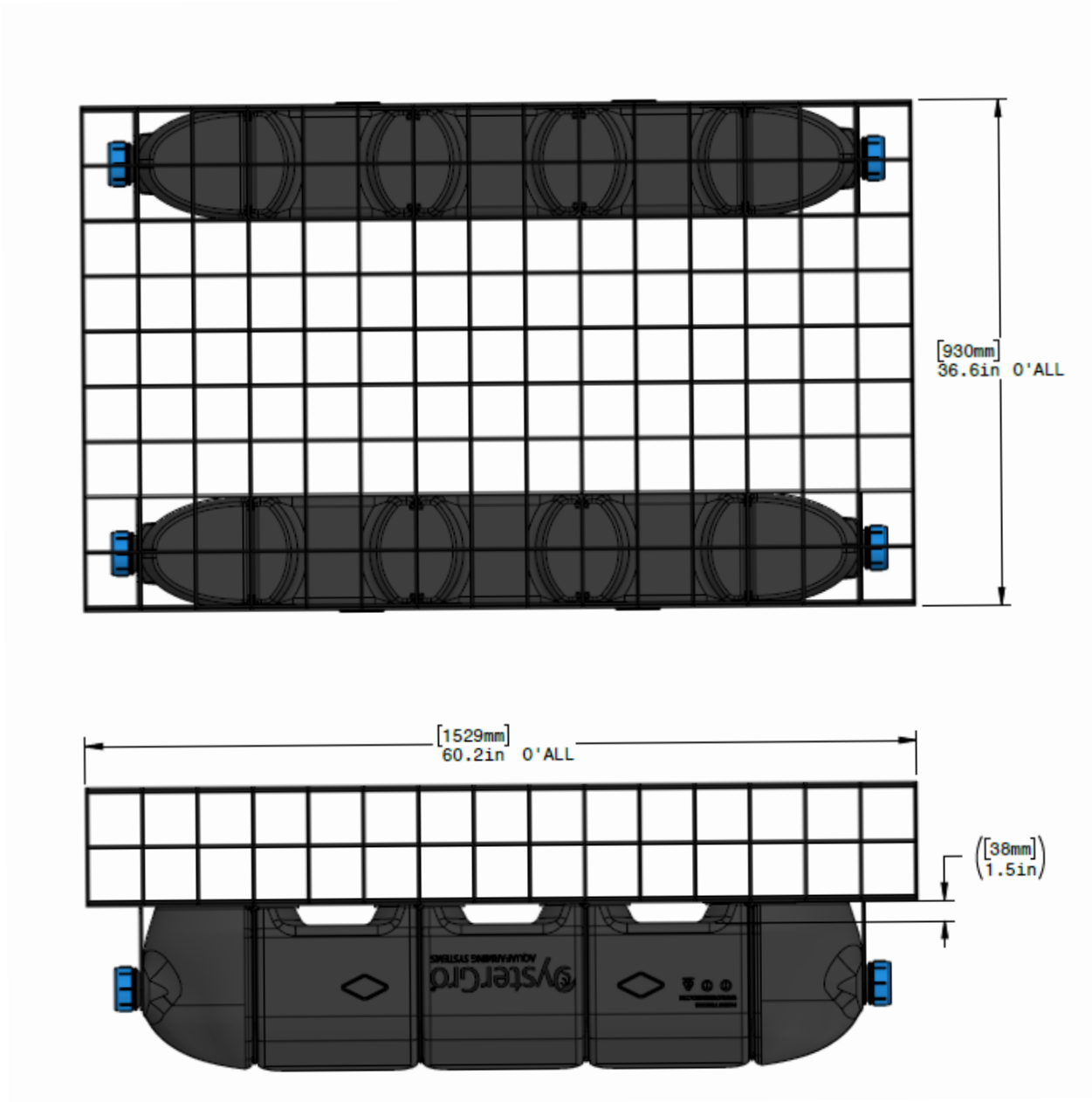
Flow N Grow™ 6-Bay Cage Dimensions



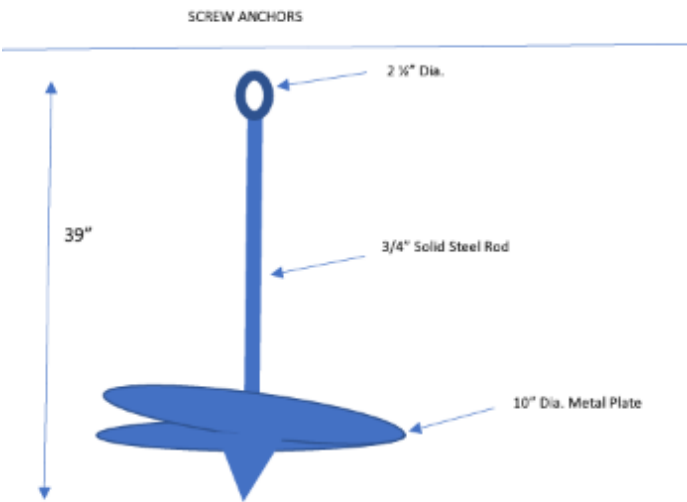
Top

Scale = 1:20

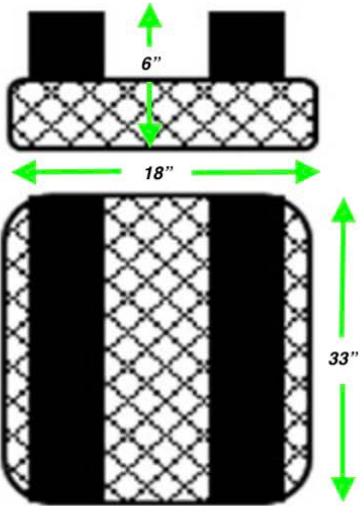
H. Equipment Layout



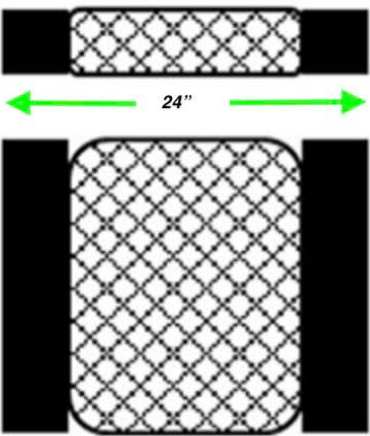
H. Equipment Layout



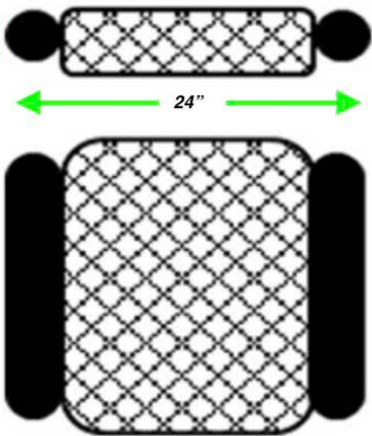
Square floats attached to top of bags



Square floats attached to sides of bags



Bullet floats attached to sides of bags





Bath Savings Institution
Since 1852

March 2, 2026

Commissioner Carl Wilson
State of Maine, Department of Marine Resources
State House
Augusta, ME 04333

Dear Commissioner Wilson:

Mere Point Oyster has discussed their intentions to submit an application for lease with Bath Savings Institution.

Bath Savings Institution has a long-standing relationship with Mere Point Oyster dating back to 2021. The business currently has a variety of deposit and loan products at our bank with an aggregate deposit account balance in the mid five-figure range. The bank has made multiple loans to the company and considers them an excellent credit risk. Their loans require regular monthly payments that have always been made as agreed and they have always demonstrated an ability to handle all accounts satisfactorily.

Based on this relationship and their track record of success, we would be pleased to consider future financing requests with them.

Please feel free to contact me at 207-371-4218 if any further information is needed.

Regards,

A stylized, handwritten signature in black ink, appearing to read 'Justin Poulin'. The signature is fluid and cursive, with a long horizontal stroke at the end.

Justin Poulin
Vice President, Commercial Lending

105 FRONT STREET, PO BOX 548, BATH, MAINE 04530

TEL. 207-442-7711 FAX 207-442-9137

1-800-447-4559

MEMBER FDIC



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: Mere Point Oyster Company LLC

2. Date of incorporation: 03/30/2016 State of incorporation: Maine

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

Name	Address	Title
Douglas Niven	37 West Marginal Road Brunswick, Maine 04011	President

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

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

Name	Address
Douglas Niven	37 West Marginal Road, Brunswick, Maine 04011
Nicole Niven	37 West Marginal Road, Brunswick, Maine 04011

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:

Mere Point Oyster Co. LLC applied and granted MAQ MP.

Mere Point Oyster Co. LLC and co-applicant have a completed application under DMR 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. **Continued on page...48**

Name	Address	Percentage of Owned Stock
Douglas Niven	37 West Marginal Road, Brunswick, Maine 04011	42
Daniel Devereaux	362 Maquoit Road, Brunswick, Maine 04011	43
Bill Floyd	64 East Marginal Road, Brunswick, Maine 04011	5

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
None			

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:

Shellfish Tagging Violation

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: _____

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:

--

A. Corporate Applicant

6. continued

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
Tyler Niven	1160 Mere Point Road Brunswick, Maine 04011	5
Cameron Niven	1160 Mere Point Road Brunswick, Maine 04011	5

MAINE
LIMITED LIABILITY COMPANY

STATE OF MAINE

CERTIFICATE OF FORMATION

Filing Fee \$175.00

File No. 20164481DC Pages 2

Fee Paid \$ 175

DCN 2161022300011 DLLC

-----FILED-----

03/30/2016


Deputy Secretary of State

A True Copy When Attested By Signature

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:

Mere Point Oyster Company LLC

(A limited liability company name must contain the words "limited liability company" or "limited company" or the abbreviation "L.L.C.," "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. MLLC-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

Douglas Niven

(Name of noncommercial registered agent)

37 W. Marginal Rd. Brunswick ME 04011

(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

3/21/16



(Signature of authorized person)

Douglas M. Niven

(Type or print name of authorized person)

(Signature of authorized person)

(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

Form No. MLLC-6 (2 of 2) Rev. 10/31/2012

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.

Printed Name	
Signature	
Date	June 12, 2026