Operations Plan

Note: Some sections may not apply to the species/operations you are proposing. Please provide as much detail as possible and you will be contacted if more information is needed. Additional plans or sheets may be submitted with the application if needed.

Details found in the 2019 NSSP Model Ordinance on page 66 and 67.

Company Name:		
Address:		
Author of the Operations Plan:		
Date:		
 Design and activities Please describe the land-based aquaculture processes and plans. Attach figures and diagrams of tanks, pumps, etc., to the application when submitting to DMR. 		

2.	Site and Boundaries Address and/or coordinates (latitude and longitude)
3.	Structure location
4.	Species List all species you intend to culture, using both common and scientific names

5.	Procedures for deleterious substances Safe locations and plans for cleaning and toxic substances, following NSSP guidelines			
6.	Sanitation, Maintenance, and supervision			
	Please follow FDA safe sanitary operating procedures			
7.	Water source			
1.	water source			
Please	e identify approved area with latitude and longitude, description of location			

8. Verification study/water quality monitoring program

The following example outlines the water quality monitoring (Table 1).

Table 1. Variables, frequency, and methods for monitoring water quality

Parameter	Production Tanks (Lines 1-4)		
	Frequency	Method(s)	
Temperature	Continuous/Daily	Thermometer	
Salinity	Weekly	Refractometer	
E. coli	Monthly	Idexx Colilert-18	

Temperature: Temperature is measured daily using a calibrated thermometer. These data are recorded on the checklist and stored in the facility.

Salinity: Salinity is measured weekly.

Routine *E. coli* **Monitoring**: Example details and laboratory: Samples for *E. coli* enumeration are collected monthly and are transported the same day to XYZ Environmental Laboratory where they are analyzed for *E. coli* (reported in MPN/100 mL) using the Idexx Colilert-18 method.

On a quarterly basis, at the same time monthly samples are collected for *E.coli* enumeration by Shellfish Inc., the Maine Department of Marine Resources will collect and process water samples for verification of results from XYZ Environmental Laboratory.

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9. 1	Recirculating Aq	uaculture System V	verification (RAS	S):	
Please p	provide details of s	system design and us	e for a closed loo	p arrangement.	
10. 0	Collection of data	a concerning quality	y of food product	tion	
Please 1	provide a descript	ion of algae growing	processes and sy	stem design.	

11. Maintenance of required records

FDA, HACCP, SSOP paperwork and records archiving and maintenance		
O		
Owner/Operator Name:		
Owner/Operator Signature:		
Date:		
FOR DMR USE ONLY		
APPROVED BY:		
Name:		
Signature:		
Title:		
Title.		
Date:		