

Draft Application Received 03.06.20
 1st Revised Application Received 03.16.20
 Deemed Ready for Scoping 03.19.20
 Final Application Received 09.10.20
 1st Revised Final Application Received 09.23.20
 Deemed Complete 10.22.2020

STANDARD LEASE APPLICATION: NON-DISCHARGE

1. APPLICANT CONTACT INFORMATION

Applicant	Pleasant Cove Oyster Farm		
Contact Person	Clay Gilbert		
Address	936 State RT 129		
City	Walpole		
State, Zip	Maine 04573		
County	Lincoln		
Telephone	207-380-6394		
Email	pc_oysterfarm@gmail.com		
Type of Application	<input type="checkbox"/> Draft Application [submitted before scoping session session] <input checked="" type="checkbox"/> Final Application [submitted after scoping session]		
Dates	Pre-Application Meeting: 2/5/20	Draft Application Submitted: 3/13/20	Scoping Session: 8/20/20

Note: If applicant is a corporation or a partnership, the "Corporate Applicant Information Document" available at: <http://www.maine.gov/dmr/aquaculture/forms/standard.html> must also be completed.

2. PROPOSED LEASE SITE INFORMATION

Location of Proposed Lease Site	
Town	Boothbay Maine
Waterbody	Damariscotta River
General Description (e.g. south of B Island)	Pleasant Cove Toward mouth of it
Lease Information	
Total acreage requested (100-acre maximum)	6.26 acres
Lease term requested (20-year maximum)	20 yrs
Type of culture (check all that apply)	<input type="checkbox"/> Bottom (no gear) <input checked="" type="checkbox"/> Suspended (gear in the water and/or on the bottom)
Is any portion of the proposed lease site above mean low water?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Note: If you selected yes, you need to complete the steps outlined in the section titled: "19. Landowner/Municipal Permission Requirements".

3. WATER QUALITY

Directions: Water Quality Information can be found here: <http://www.maine.gov/dnr/shellfish-sanitation-management/closures/pollution.html>

Pollution Area (e.g. "19-A"):	23-c
Pollution Area Section (e.g. "B.2" or "none"):	None
Water Quality Classification (e.g. approved, restricted, etc.):	open approved

Note: If you are proposing to grow molluscan shellfish in waters classified as anything other than open/approved, you will need to contact the Bureau of Public Health to discuss your plans at the following email: DMRPublicHealthDiv@maine.gov

4. SPECIES INFORMATION

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

Name of species to be cultivated (include both common and scientific names):	Name and address of the source of seed stock, juveniles, and/or smolts	Maximum number (or biomass) of organisms you anticipate on the site at any given time
1. American oyster <i>Crassostrea virginica</i>	Muscogus Bay Aquaculture P.O. Box 204 Bremen Me 04551	4 million
2.	Moot Sea Farm 312 State Route 129 Walpole Me 04573	
3.	DEI 39 Wildflower Ln P.O. Box 83 Beals, Me 04611	
4.		
5.		

B. Do you intend to possess, transport, or sell whole or roe-on scallops? Yes No

If you answered "yes" please contact the Bureau of Public Health to discuss you plans at the following email: DMRPublicHealthDiv@maine.gov

Note: If you are proposing to grow molluscan shellfish, this application also serves as your written operational plan as required in the National Shellfish Sanitation Program (NSSP) Model Ordinance Chapter 2 and must be maintained in your files. If you wish to submit an operational plan separate from this application, please contact: DMRPublicHealthDiv@maine.gov

5. VICINITY MAP

Note: Please label as: 'Vicinity Map'.

Directions: Using a NOAA Chart or USGS topographic map, show the area within a minimum of one-half mile of the proposed lease site.

The map needs to display the following:

- The waters, shore lands, and lines of mean high and mean low water within the general area of the lease
- An arrow indicating true north
- A scale bar
- The approximate lease boundaries

6. BOUNDARY DRAWING

Note: Please label as: 'Boundary Drawing'.

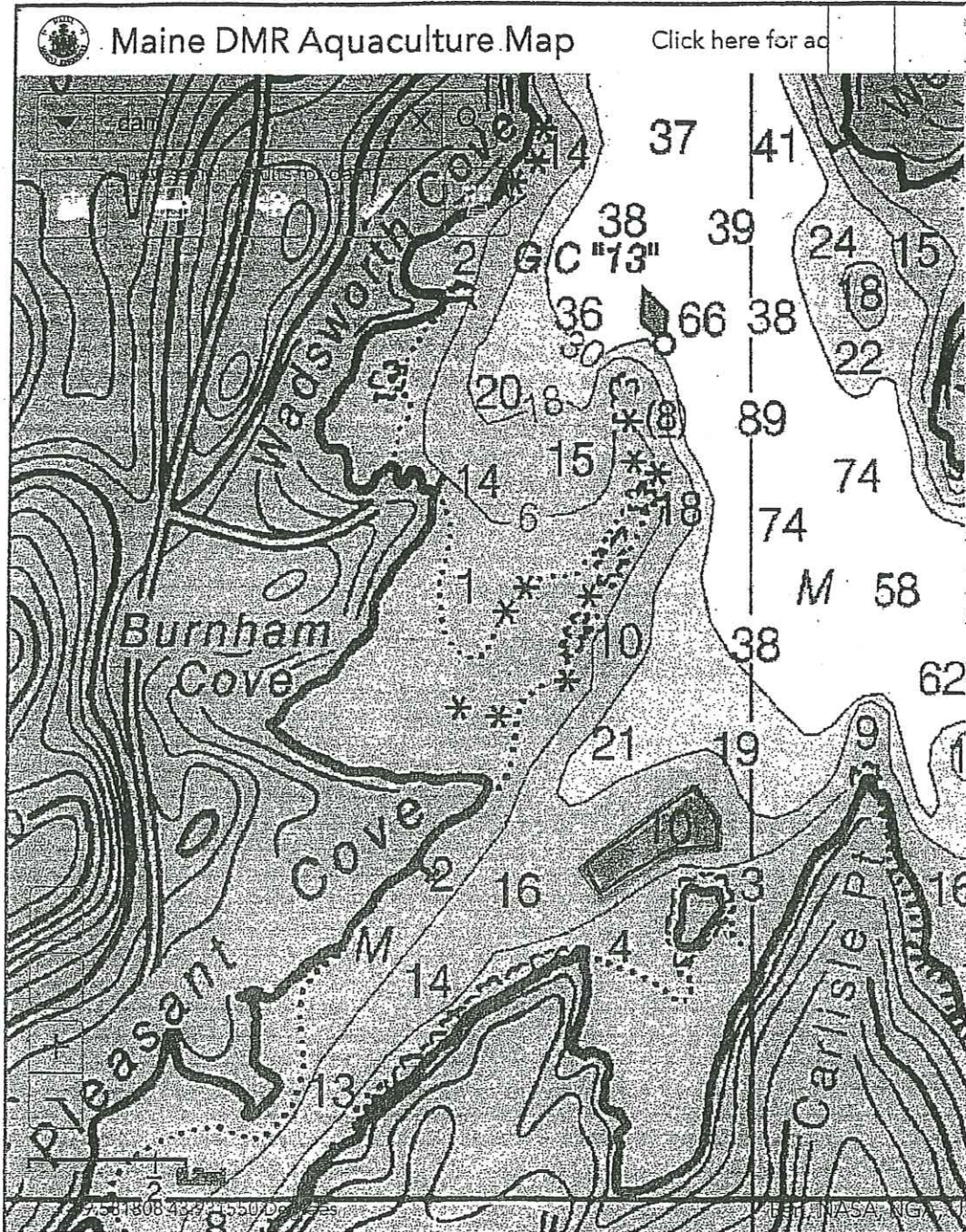
Directions: Depict the boundaries of the proposed lease site. Provide a drawing with all corners, directions, and distances labeled. Provide coordinates for each corner as follows:

- Coordinate Description

Provide geographic coordinates for each corner of the lease site in latitude and longitude as accurately as possible (e.g., to the nearest second or fraction of a second). Identify the datum from the map, chart, or GPS unit used to develop these coordinates. The datum will be shown on the map or chart you are using. The Coordinate Description may be provided separately from the Boundary Drawing.

	Latitude	Longitude
1	43° 55' 21.50" N	69° 35' 12.49" W
2	43° 55' 19.40" N	69° 35' 11.70" W
3	43° 55' 26.96" N	69° 35' 0.50" W
4	43° 55' 24.85" N	69° 34' 59.76" W
5	43° 55' 22.68" N	69° 35' 4.29" W
6	43° 55' 22.50" N	69° 35' 0.28" W

Vicinity Map

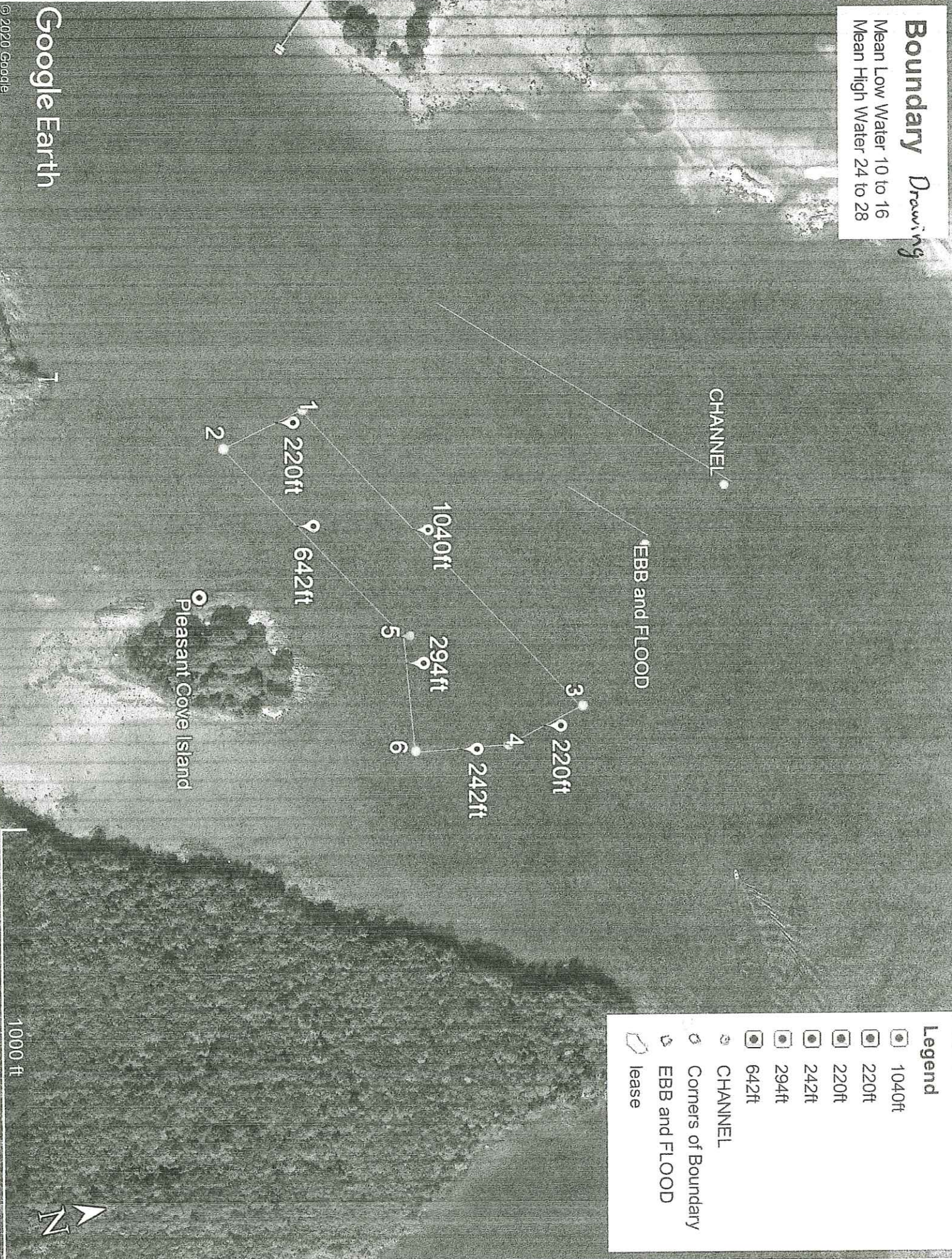


Mean Low water 10'-16'
Mean High water 24'-28'



Boundary Drawing

Mean Low Water 10 to 16
Mean High Water 24 to 28



Legend

- 1040ft
- 220ft
- 220ft
- 220ft
- 242ft
- 294ft
- 642ft
- CHANNEL
- Corners of Boundary
- EBB and FLOOD
- lease

7. SITE DEVELOPMENT

Directions: If your operations require the use of cages, nets, ropes, trays, or any object (structure) other than the organism to be grown directly on the bottom or buoys to mark the corners of the lease site, you must submit gear drawings and maximum structure schematics (information below). This section is intended to provide accurate plans depicting the physical structures to be placed in the proposed area. All dimensions need to be labeled with the appropriate units (i.e. 10ft, 10in). If you are proposing a bottom lease (no gear), please skip to question "F. Marking".

Note: You may embed the schematics within the document or attach them to the end of your application. If you attach the schematics, please label them according to the instructions provided below.

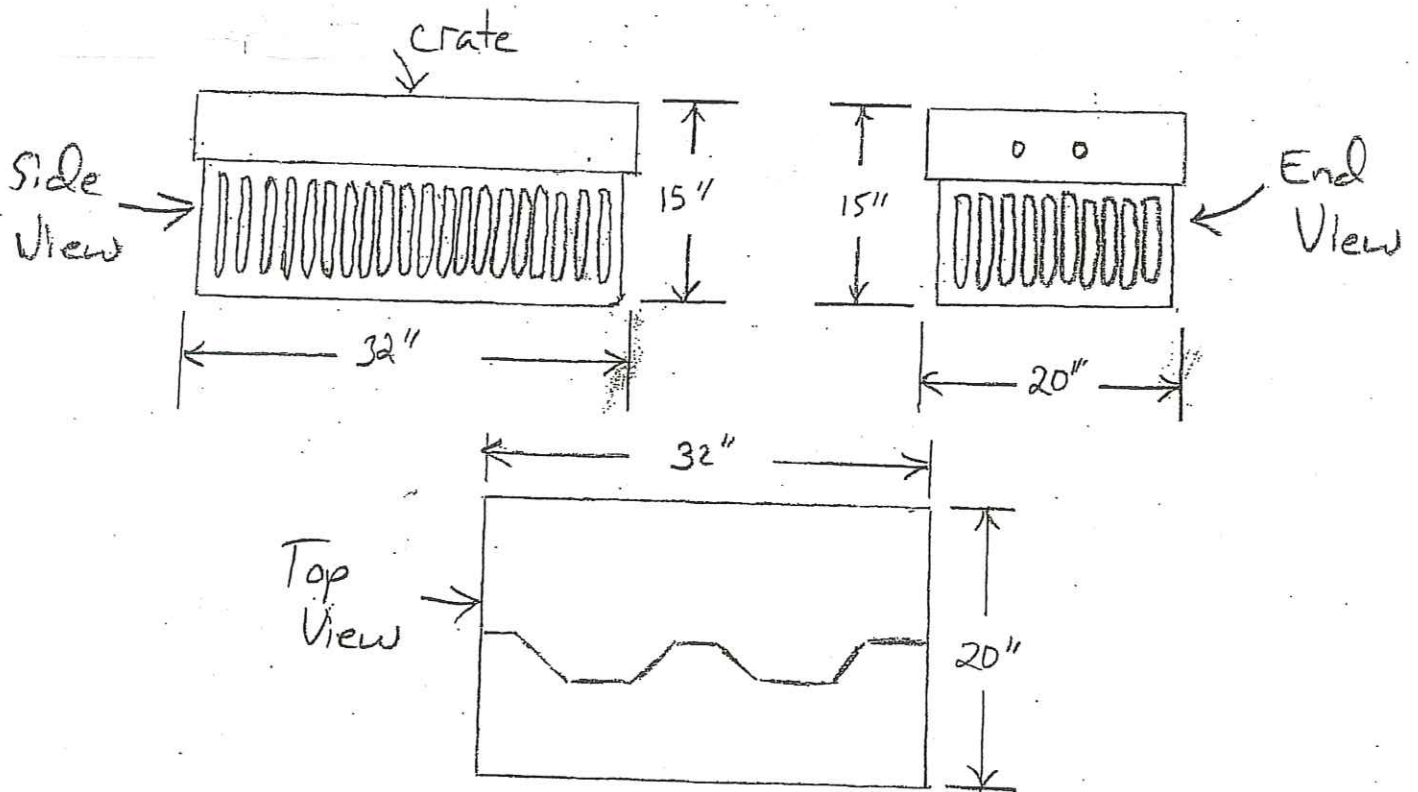
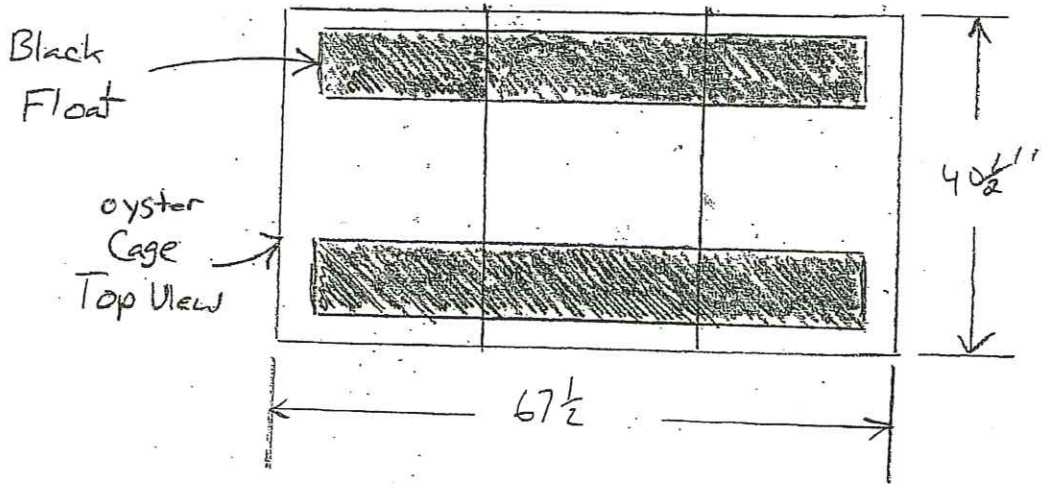
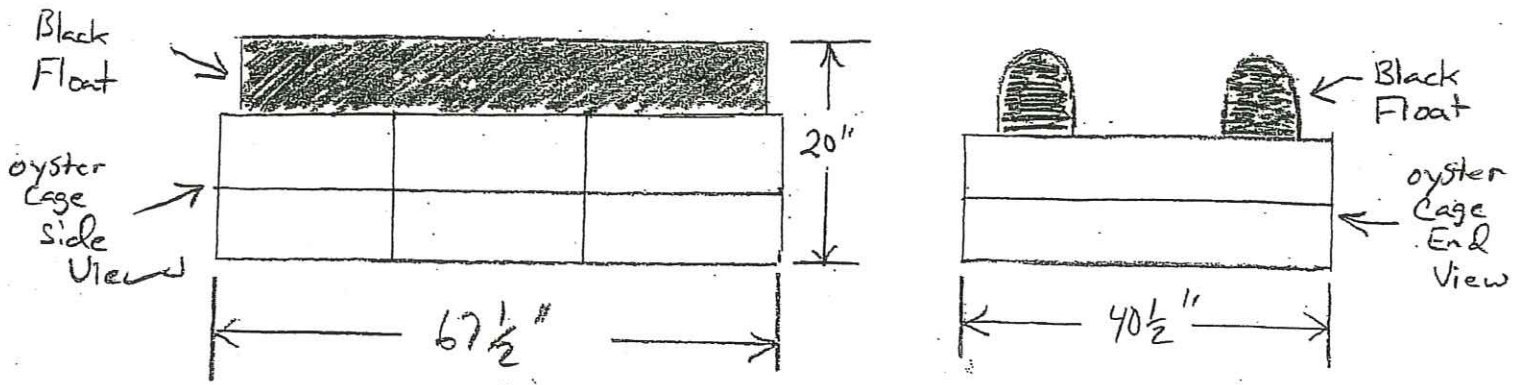
A. Gear Information

Directions: Include a drawing of an individual piece of gear for each of the gear type(s) you plan to use. Include units referenced (i.e. 10in, 10ft, etc.).

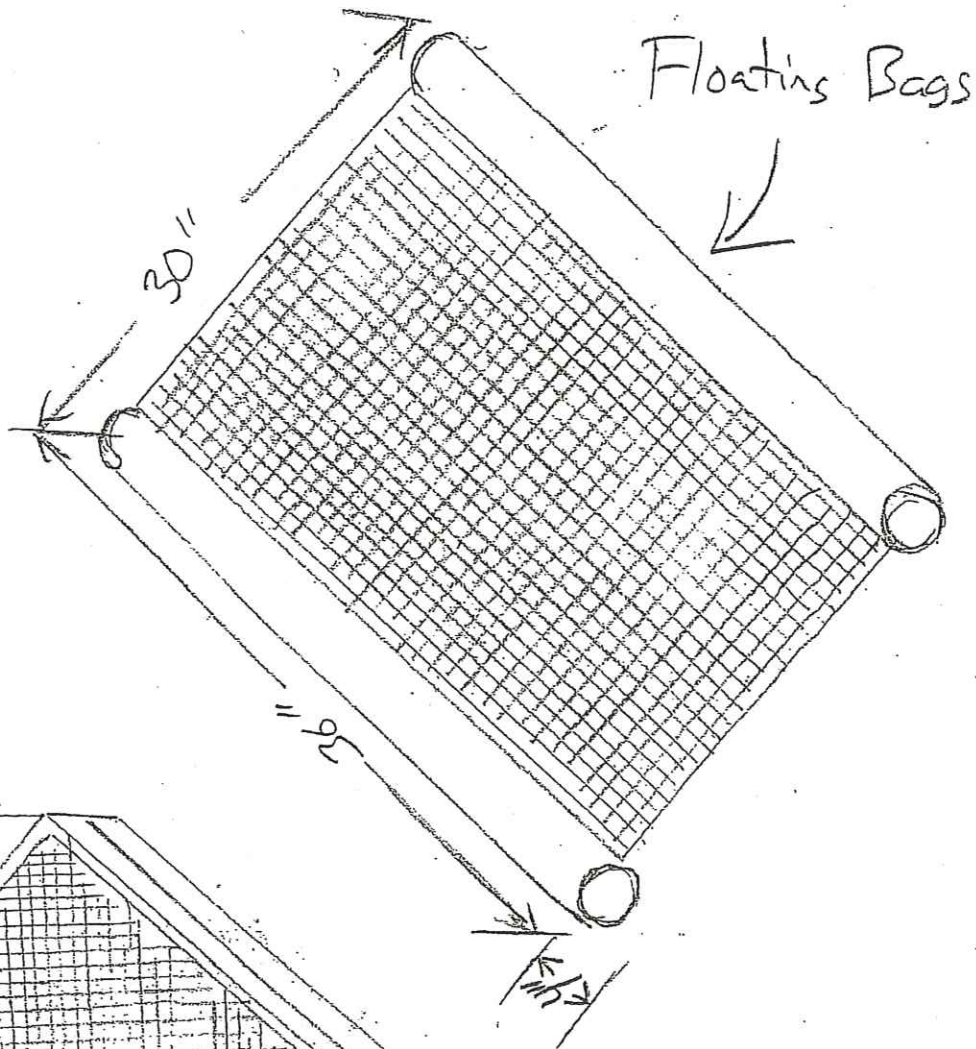
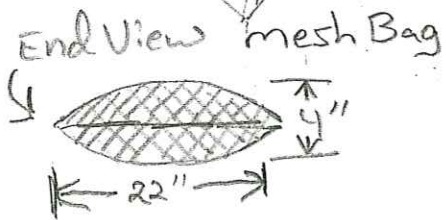
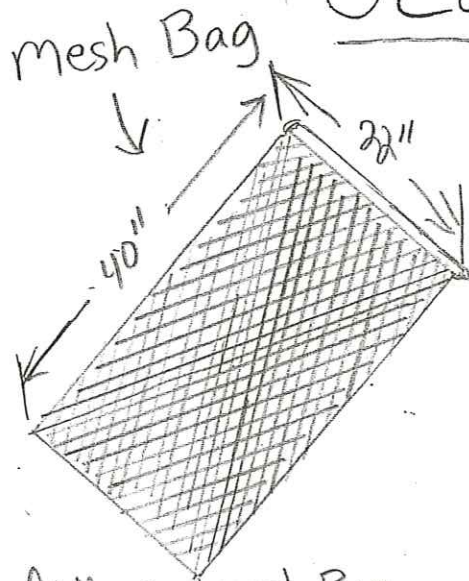
1. Gear Drawing: Please include the following for each gear type that will hold organisms to be cultured. (e.g. Polar circles, marine algae longlines, oyster cages) and label as "Gear Drawing". This view must show the following:
 - Length, width, and height of each gear type.
2. Gear Table: List and describe each individual gear type that you will use in the table below. (e.g. Polar circles, marine algae longline, oyster cages, moorings, mooring lines, buoys, etc.).

Specific Gear Type (e.g. soft-mesh bag)	Dimensions (e.g. 16" x 20" x 2")	Time of year gear will be deployed (e.g. Spring, Winter, etc.)	Maximum amount of this gear type that will be deployed on the site (i.e. 200 cages, 100 lantern nets, etc.)	Species that will be grown using this gear type
Oyster cages	40 1/2" x 67 1/2" x 20 1/2"	All year	1,728 cages	American oyster
mesh bags	40" x 22" x 4"	All year	10,368 bags	American oyster
wooden floating trays	24" x 36" x 4"	Spring + Summer	100 cages	American oyster
floating bags	36" x 30" x 4"	All year	100 bags	American oyster
crates	32" x 20" x 15"	Spring, Summer fall.	50 crates	American oysters

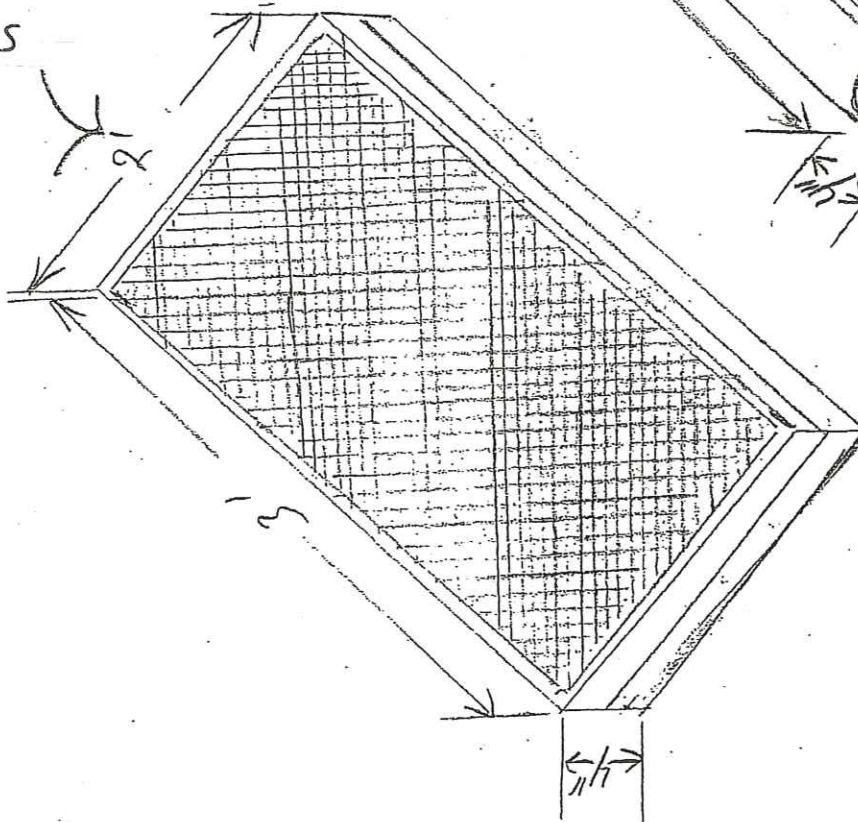
Gear Drawing



Gear Drawing

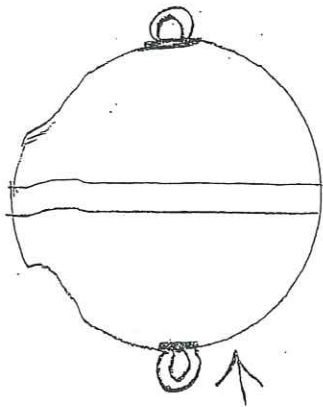


Wooden Floating
Trays



Types of Mooring Balls

Gear Drawing



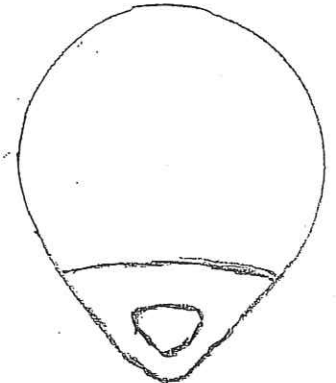
Jim Buoy



Go Deep Buoy



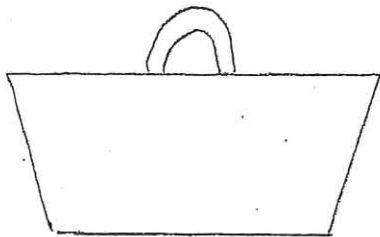
Pot Buoy



Poly Ball

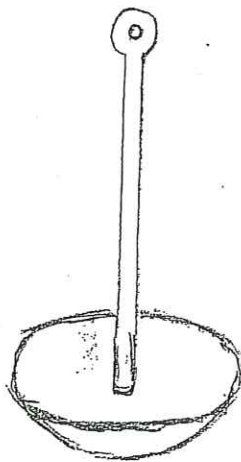
Note: Buoys + Balls typically will be between 12" to 24" in size

Moorings and anchors



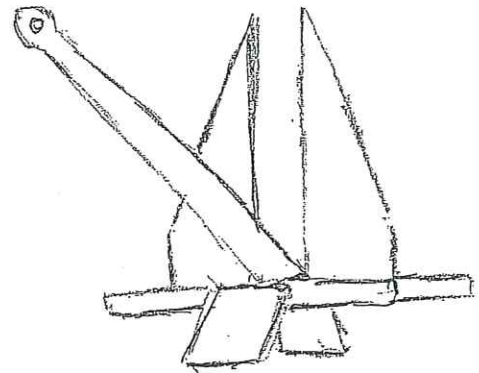
Concrete

Appox 350 lbs



Mushroom

Appox. 100 lbs



Danforth

Appox. 50 lbs

B. Maximum Structure and Mooring System Schematic

Directions: Include drawings of your maximum gear layout. Include units referenced (i.e. 10in, 10ft, etc.).

1. Overhead View. Please include the following and label as "Overhead View":
 - Maximum layout of gear, including moorings.
 - Length and width of project.
 - Approximate spacing between gear.
 - Lease boundaries and the location of proposed corner markers and any additional gear markers that would be present.

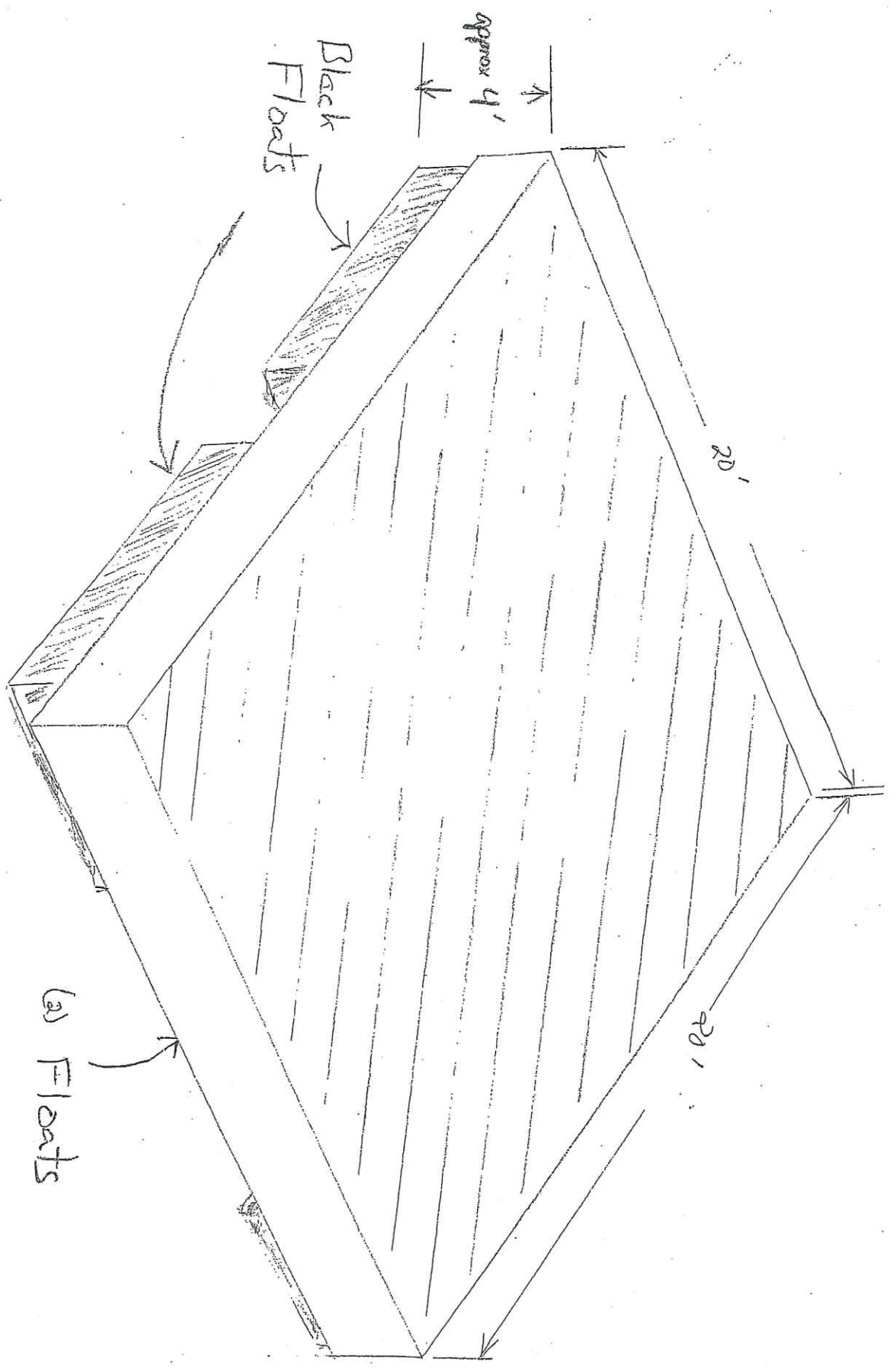
2. Cross-Section View. Please include the following and label as "Cross-Section View":
 - The sea bottom.
 - Profile of gear in cross-section as it will be deployed.
 - Label gear with dimensions and materials.
 - Show mooring gear with mooring type, scope, hardware, and line type and size.
 - Depth of gear in relation to the water's surface at mean low water and mean high water (if applicable).

Note: Please include an additional Cross Section View, depicting the elements listed below, if there will be seasonal changes to gear layout (i.e. over wintering).

C. On-Site Support Structures

1. Describe structures such as barges, sheds, etc., to be located on-site. Provide a schematic and indicate the dimensions, including height above sea level, materials, etc.
(2) 20'x20' Floats. Floats approx. 30" above Sea level. Floats are natural wood color with black floatation devices. Ref. page 11
2. Describe the storage and use of oil, gasoline or other hazardous materials on this facility. If petroleum products are to be stored on site, provide a spill prevention plan.
No Storage of hazardous materials on this facility.

Structure



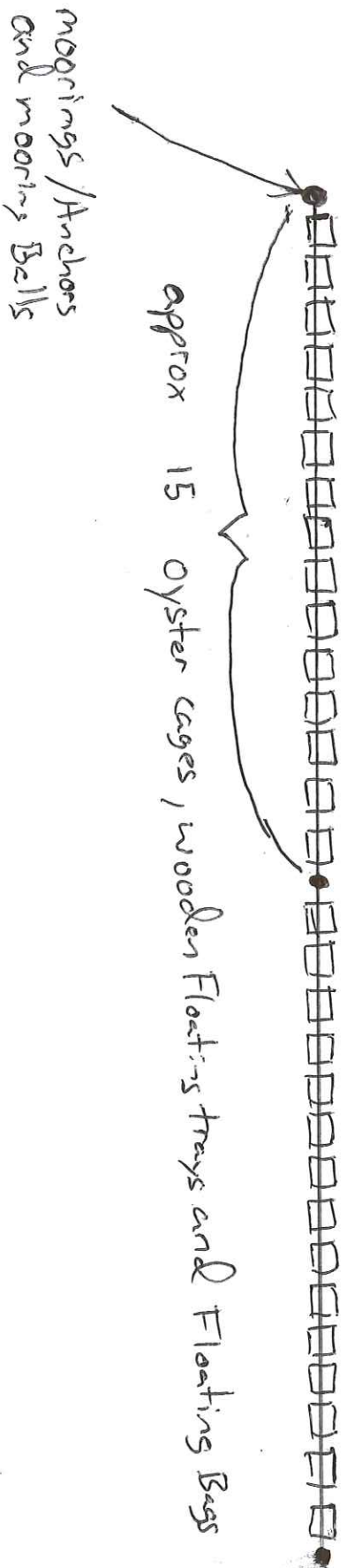
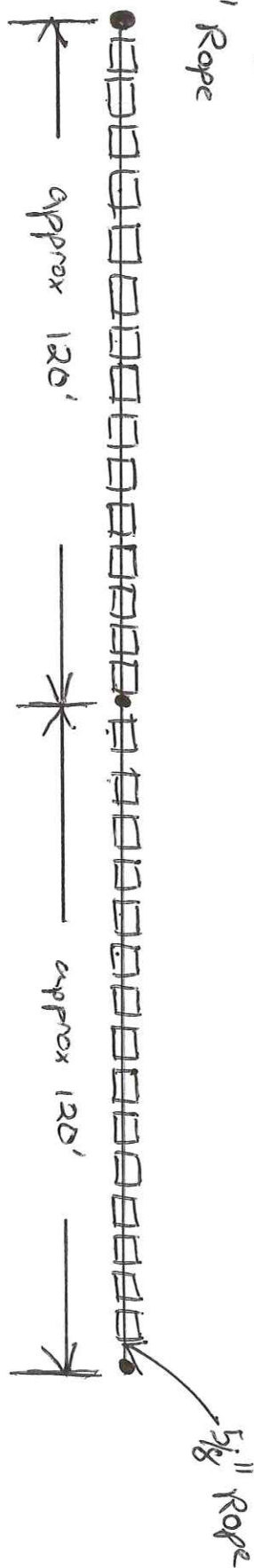
Key

□ = Oyster cages, wooden floating trays, and floating Bags

● = moorings

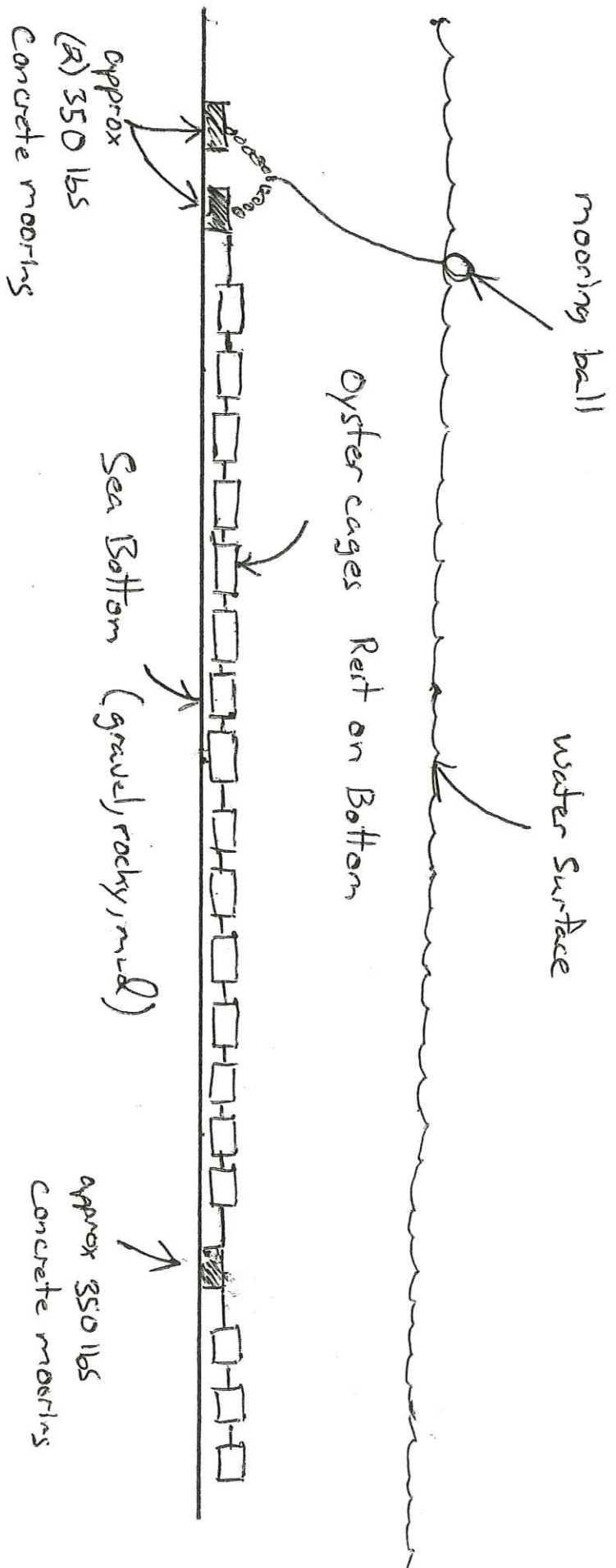
— = 5/8" Rope

Overhead View



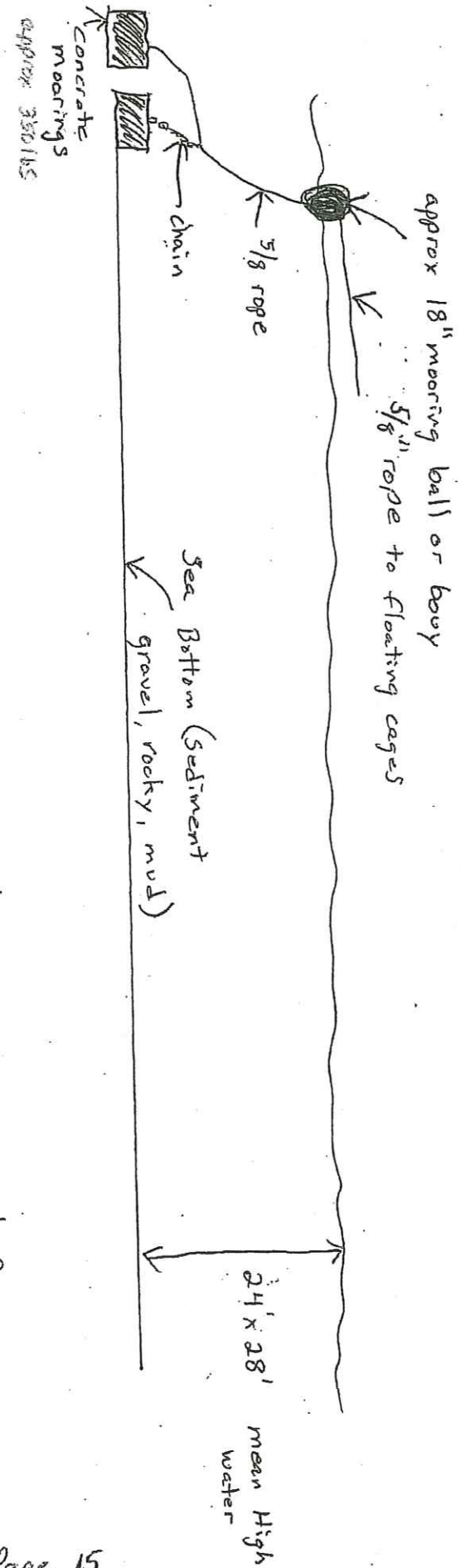
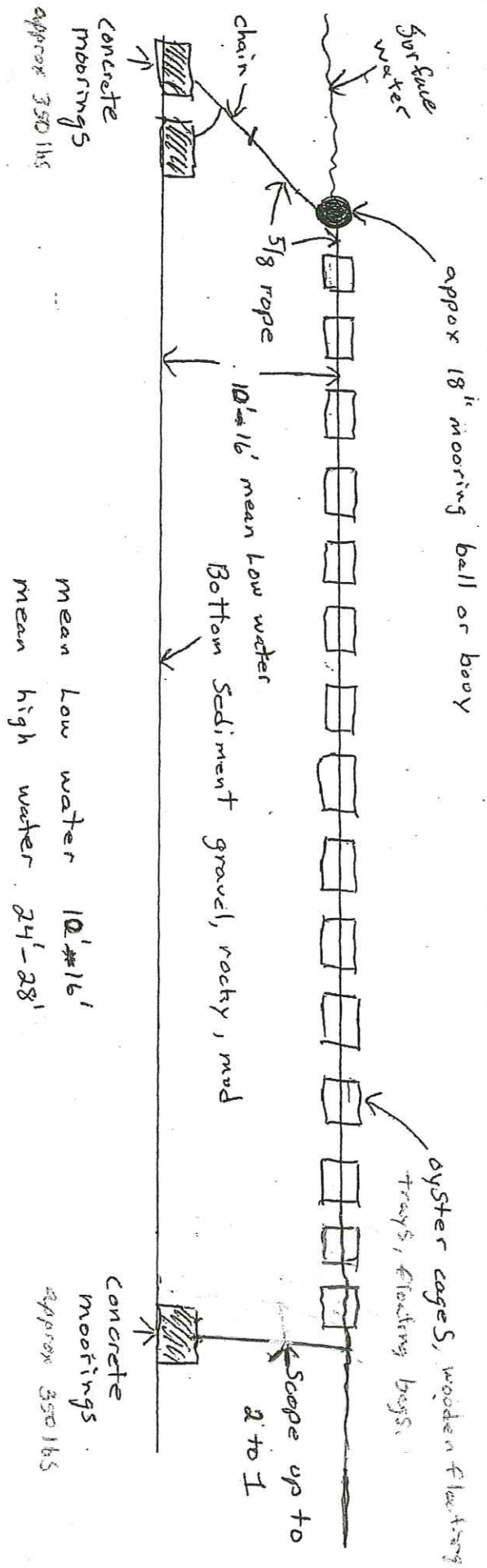
Over Wintering View

Mean Low water 10'-16"
Mean High water 24'-28"



Also to be used Danforth anchors, mushroom anchors, + Screw in anchors

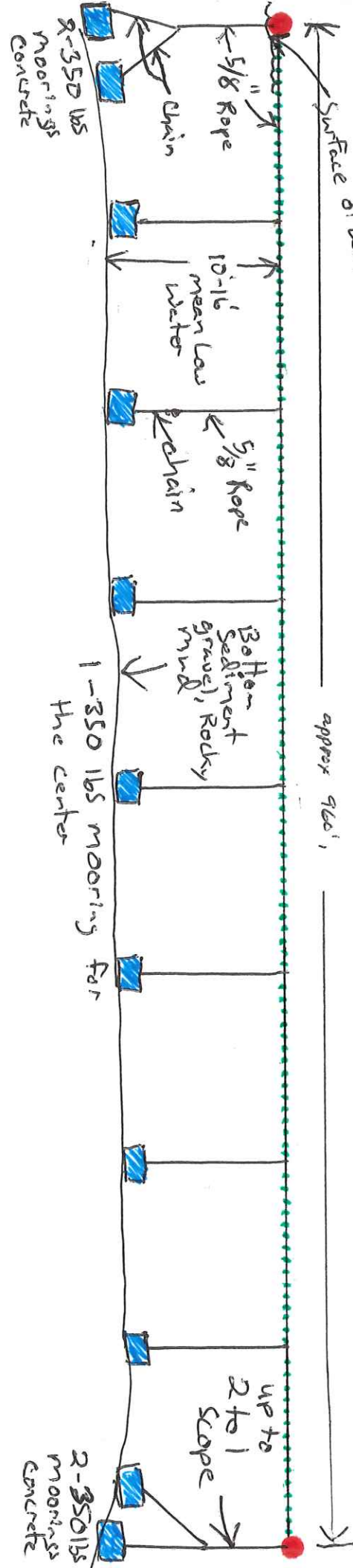
Cross Section View



Also to be used Danforth anchors, mushroom anchors + Screw in anchors.

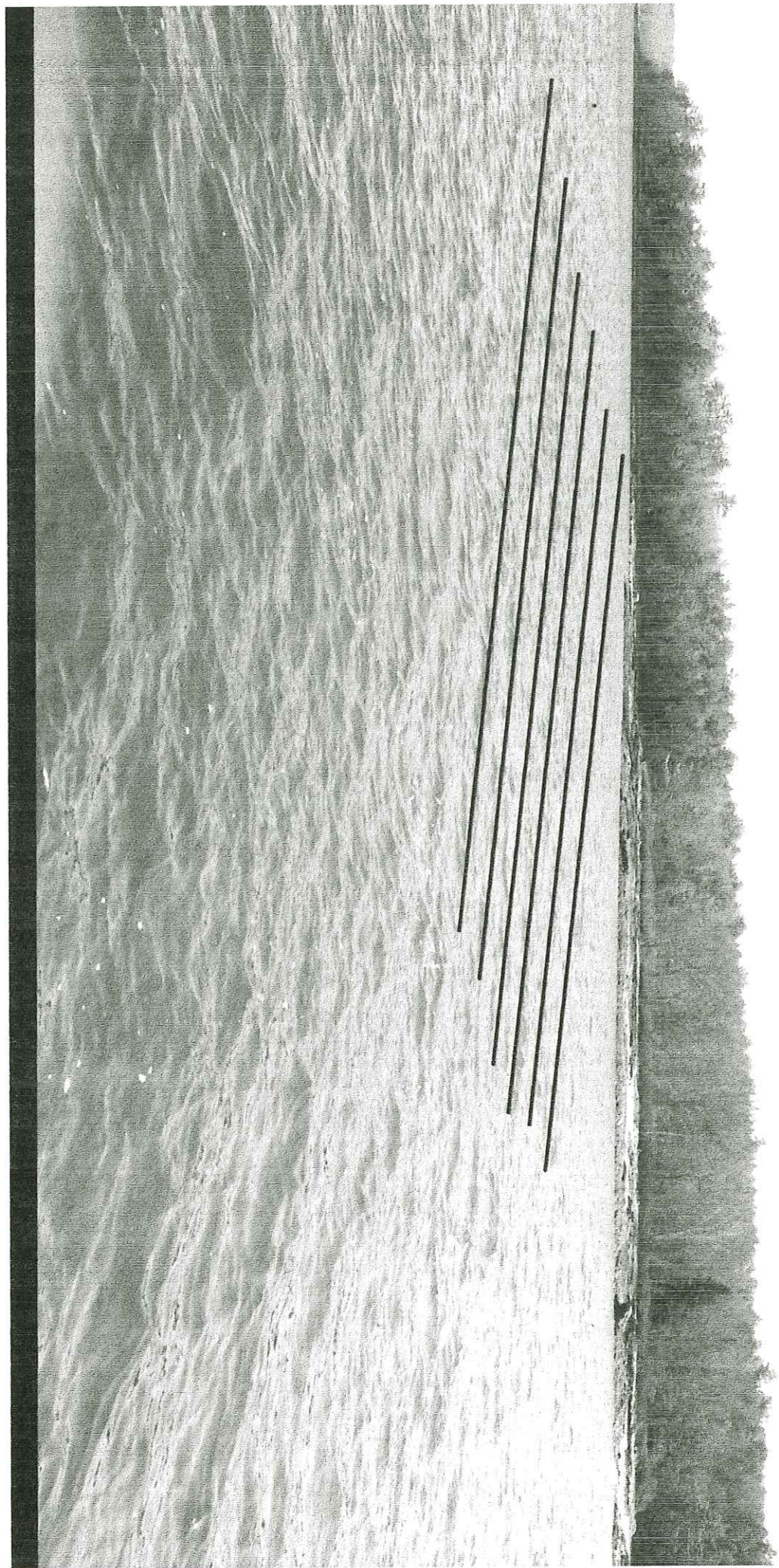
Cross Section View

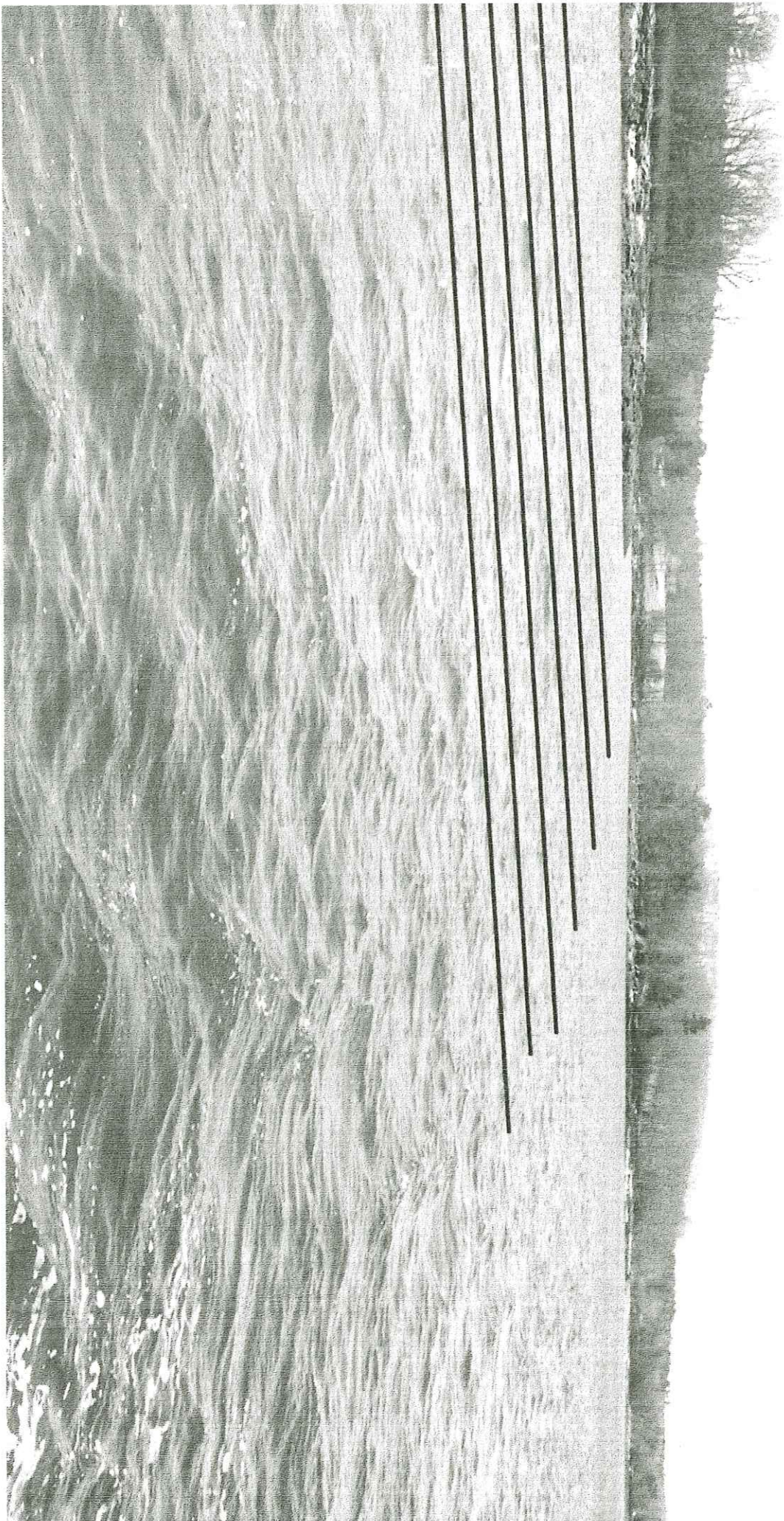
- - moorings Ball - Approx 18" Moorings Ball or buoy
- - 350 lbs mooring
- - Oyster cages - wooden Floating trays - Flat Bags



Mean Low water 10'-16'
 Mean High water 24'-28'

Also to be used danforth anchors, mushroom anchors + screw in anchors.
 Longlines may hold multiple gear types such as oyster cages, wooden floating trays and floating bags.





D. Gear Color

Provide the color of the gear and structures proposed to be used at the lease site.

Current standard color is Green, black or grey to help alleviate any visual impact observed from the shore. Floats are natural wood color with black flotation devices. Poly balls or go deep balls are typically white or yellow.

E. Equipment Layout

Provide schematic or photographic renderings of the generalized layout of the equipment as depicted from two vantage points on the water. Provide the locations of the two vantage points.

F. Marking

Will you be able to mark your site in accordance with DMR regulations, Chapter 2.80?

Yes No

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

Note: If a lease is granted, you will also be required to mark the site in accordance with appropriate US Coast Guard Regulations. If you have questions about US Coast Guard Regulations contact: 1st Coast Guard District, Aids to Navigation Office ((617)-223-3293).

8. PRODUCTION ACTIVITIES

Directions: If you are cultivating more than one species, you will need to provide information for each species. Please attach additional pages if needed.

A. Please explain your proposed seeding activities. What months will seeding occur and how often will you be onsite to seed during this time.

Typically Seeding will occur May-July. They will be tended once a week.

B. Please explain your proposed tending/maintenance activities.

Farm operations include cleaning, processing, harvesting of oyster cages, wooden floating trays, and floating bags. There will also be sinking and raising of oyster cages, oyster cages, floating wooden trays, and floating bags will be rotated as per needed.

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

Oyster cages, wooden floating trays, and floating bags will be flipped on a rotating monthly schedule in accordance with manufacturer recommendations in order to mitigate bio-fouling, which will result in a crew member on site multiple days per week. This will also allow for consistent monitoring of the crop and equipment to notice and remedy any required maintenance.

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

We will be using a boat or skiff to tend oysters while they are on surface. Oysters will be harvested by placing them on sorting/sizing tables or tumblers and placed into bags or crates for transport and storage.

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

Typically harvesting will take place weekly throughout the operating season (April-Dec)

F. Will gear be on the site year-round? Yes No

G. If gear will not be on the site year-round, please describe any overwintering or "off season" plans for the site. For example, will you remove gear from the site and/or deploy gear in different areas within the proposed site? Please include where gear or product will be located if removed from the site.

most oyster cages will be deployed on bottom at site. Some oyster cages may remain on surface during overwintering. wooden floating trays and floating bags will be removed in winter and stored on land at company headquarters.

9. NOISE AND LIGHT

Directions: If a question does not pertain to your proposed operations, please write "not applicable" or "N/A."

A. What type of boats will be used on the site? When and how often will these vessels be on the site?

A boat or skiff will be used on site multiple days per week to tend and harvest oysters

B. What type of powered equipment (e.g. generator, power washer, grading equipment, barges, etc.) will be used on the site? When and how often will the equipment be used?

An electric power washer will be used for keeping equipment clean which will be powered by a 2000 watt generator during operating months and utilized as needed to deal with biofouling. Tumbler/grader will be utilized throughout the operating season as needed to clean + sort oysters. Tumbler/grader will be electric and powered by 2000 watt generator

C. Specify how you intend to reduce noise levels from the boats and other powered equipment.

A wooden housing will be built around the 2000 watt generator to both protect it from the elements and reduce its noise levels while in operation. Generator will not be stored on site.

D. Provide the number, type (whether fixtures are shielded), wattage and location of lights, other than those used for navigation or marking, that will be used at the proposed lease site.

N/A

E. Indicate under what circumstances you might work at your site beyond daylight hours.

IF storm or debris damage occurs to site, crew members will be deployed to temporarily secure and stabilize site until daylight hours.

10. CURRENT OPERATIONS

Directions: If a question does not pertain to your proposed operations, please write "not applicable" or "N/A."

A. Describe your existing aquaculture operations.

CGIL 120, CGIL220, CGIL320, CGIL420

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

Existing LPA's will be relinquished on approval of lease.

11. ENVIRONMENTAL CHARACTERIZATION

Directions: Using your knowledge of the area, describe the environment of the proposed lease site. Be sure to include units of measurement in your answers (i.e. feet, cm/s).

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

10' - 16'

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

24' - 28'

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

On Ebb tide current approx 1 knt in the direction of NNE, on the flow tide current is approx 1 knt in the direction SSW

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

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

mud, sand, gravel, rock

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

Flat

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

Typically lobsters are rare, Crabs are common. A variety of fish occasionally pass through at various times of the year, such as mackerel or elwives.

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

Typically there are clams above the intertidal
No fish migration has been observed.

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

Haven't seen any aquatic vegetation. No aquatic vegetation was visually observed from the surface of the water from June thru Sept 2019

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

Forested Shoreline around proposed site. There are 2 docks, one approx. 400' from SE corner. Another dock approx 800' from SW corner. There are a few houses in view, the closest house being approx. 1,300 ft from proposed site.

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

Yes No

Note: The location of Essential Habitats in the State of Maine, along with information on how projects within these areas are reviewed, can be found here: <https://www.maine.gov/ifw/fish-wildlife/wildlife/endangered-threatened-species/essential-wildlife-habitat/index.html>

If a project is located within an Essential Habitat, applicants are strongly encouraged to contact the MDIFW Environmental Review Coordinator (John.Perry@maine.gov, phone: 207-287-5254) prior to application submission.

12. EXISTING USES

A. Describe the existing uses of the proposed area in questions A.1 through A.5 below. Please include the a) type, b) time of year the activity occurs, c) frequency, and d) proximity to the lease site.

1. Commercial Fishing

No commercial fishing in site area. Fishing is done out in the channel where the water is deeper

2. Recreational Fishing

No recreational fishing has been observed on the proposed site. Have seen recreational fishing along shore.

3. Boating Activities (please also include the distance to any navigable channel(s) from your proposed site at low water)

Traffic generally is outside the site in the main channel where it is safer to operate a boat. The distance to the navigable channel is approx 400' from proposed site. Have observed in main channel

lobster boats, pleasure boats, kayaks and sail boats.

4. Riparian Ingress/Egress

none

5. Other uses (kayaking, swimming, etc.)

Have observed in main channel lobster boats, pleasure boats, kayaks and sail boats. Along shore have seen recreational fishing. Have not observed any water skiing.

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

Yes there are 2 Docks, one approx 400' from SE corner. Another Dock approx 800' from SW corner

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

no

13. EXCLUSIVE USE

If your lease is granted, what activities would you request be excluded from occurring within the boundaries of the lease site? In your answer please address applicable commercial and recreational fishing, boating activities, and other activities you listed in the Existing Uses section of this application.

none, If lease is granted all current uses are welcome to continue as long as they don't interfere with our equipment or crops.

14. RIPARIAN LANDOWNERS AND SITE ACCESS

A. If your lease is within 1,000ft of shorefront land (which extends to mean low water or 1,650 ft. from shore, whichever is less), the following supporting documents are required:

1. A labeled copy of a tax map(s) depicting the location of the proposed lease site and including the following elements:
 - Label the map "Tax Map: Town of (name of town)."
 - Legible scale
 - Tax lot numbers clearly displayed
 - The boundaries of the proposed lease
2. Please use the Riparian Landowner List (included on the next page) to list the name and address of every shorefront landowner within 1,000ft of the proposed lease site. Have the tax collector or clerk of the municipality certify the list.
3. If any portion of the site is intertidal, you need to complete the steps outlined in the section titled: "19. Landowner/Municipal Permission Requirements".

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

Yes No

Note: If you selected yes, you will need to complete the landowner permission requirements included in "19. Landowner/Municipal Permission Requirements" of this application.

C. How will you access the proposed site?

by boat

D. How will your proposed activities affect riparian ingress and egress?

There is no impact on riparian ingress and egress

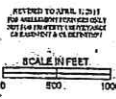
Tax map

PROPERTY MAP
BOOTHBAY
 MAINE



LEGEND

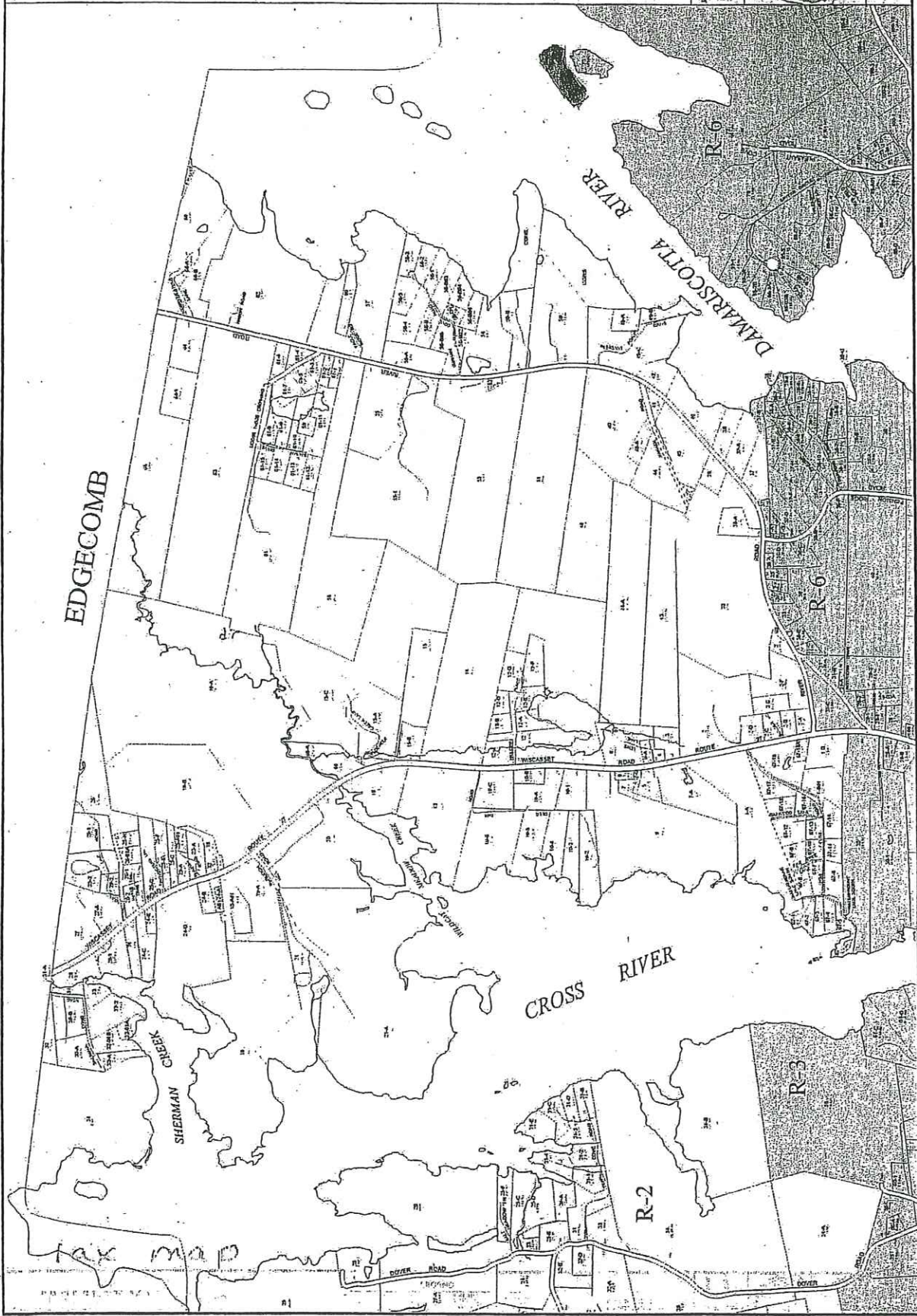
ARTICLE 17	EXTENDING
ARTICLE 1-26	RIGHT OF WAY
ARTICLE 23	WETLAND
ARTICLE 301	WATER BODY
ARTICLE 302	STREAM



Map & Information & Associates
 423 Broad Hill Road
 Boothbay Harbor, ME 04515
 www.mapandinfo.com



R-5



Tax map

RIPARIAN LANDOWNER LIST

THIS LIST MUST BE CERTIFIED

On this list, please show the current landowners' names and mailing addresses as listed in the municipal tax records for all riparian shorefront parcels within 1,000 feet of the proposed lease site along with the map and lot number for each parcel. **It is the applicant's responsibility to assemble the information for the Town Clerk to certify.** The Town Clerk *only* certifies that the information is correct according to the Town's records. Once you have completed the form, ask the Town Clerk to complete the certification section below. If the parcels are within more than one municipality, provide a separate, certified riparian list for each municipality.

TOWN OF: Boothbay

MAP#	LOT#	Landowner name(s) and address(es)
R05	CON5	Drew O Peck, Erica Marie Peck 1200 Monument St. Concord MA 01742
R05	CON5	David W Wilson, Susan M Wilson 249 River Rd Boothbay Me 04537
R05	050-B	David W Wilson, Susan M Wilson 249 River Rd Boothbay Me 04537
R05	54	David Stimson 261 River Rd Boothbay Me 04537
R05	56-B06	Bente Villadsen 17 Burnham Cove Rd Boothbay Me 04537
R05	56-B04	Ruth F. Gaillard 27 Burnham Cove Rd Boothbay Me 04537

Please use additional sheets if necessary and attach hereto.

CERTIFICATION

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

SIGNED: Andrea D. Lowery DATE: 3/13/20

RIPARIAN LANDOWNER LIST

THIS LIST MUST BE CERTIFIED

On this list, please show the current landowners' names and mailing addresses as listed in the municipal tax records for all riparian shorefront parcels within 1,000 feet of the proposed lease site along with the map and lot number for each parcel. **It is the applicant's responsibility to assemble the information for the Town Clerk to certify.** The Town Clerk only certifies that the information is correct according to the Town's records. Once you have completed the form, ask the Town Clerk to complete the certification section below. If the parcels are within more than one municipality, provide a separate, certified riparian list for each municipality.

TOWN OF: Boothbay

MAP #	LOT #	Landowner name(s) and address(es)
R05	56-B03	clo John L Clark, Karen L Clark Trustees 17 Woodhaven Rd Waban MA 02468
R06	72	Carlisle Homestead LLC clo Sally Kent-manager 142 Deer Run Rd. Bowdoin Me 04287
R06	73	Carlisle Homestead LLC clo Sally Kent-manager 142 Deer Run Rd. Bowdoin Me 04287

Please use additional sheets if necessary and attach hereto.

CERTIFICATION

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

SIGNED: Andrea D. Lavery DATE: 3/13/20

15. TECHNICAL CAPABILITY

Provide information regarding professional expertise. Attaching resume or documentation of practical experience necessary to accomplish the proposed project would satisfy this requirement.

Been on water lobstering, Shrimping, ground fishing for over 30 years.

16. FINANCIAL CAPABILITY

A. Financial Capability

Please provide documentation to show you have the financial resources to implement the proposal. For example, you may submit a letter from a financial institution or funding agency indicating that you have an account in good standing, or their willingness to commit funds.

Note: Any financial information you submit with your application is part of the public record. Please exercise discretion when submitting financial information.

See attached bank letter

B. Cost Estimates

Please provide cost estimates of the proposed aquaculture activities.

estimated start up cost for the first 3 years is approx. \$150,000.00



March 5, 2020

To Whom It May Concern:

Pleasant Cove Oyster Farm LLC has a checking account in good standing with Camden National Bank.

Sincerely,

A handwritten signature in black ink, appearing to read "Randy Clark".

Randy Clark
Vice President, Banking Center Manager

17. ESCROW ACCOUNT OR PERFORMANCE BOND

Check the category that describes your operation:

Check Here	Lease Category	Amount of Required Escrow or Performance Bond
<input type="checkbox"/>	No gear/structure, no discharge	None
<input type="checkbox"/>	No gear/structure, discharge	\$500.00
<input type="checkbox"/>	≤ 400 square feet of gear/structure, no discharge	\$1,500.00
<input checked="" type="checkbox"/>	>400 square feet of gear/structure, no discharge	\$5,000.00*
<input type="checkbox"/>	Gear/Structure, discharge	\$25,000.00

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

I, (printed name of applicant) Greg Johnston have read DMR Aquaculture Regulations Chapter 2.64(10) (D) and if this proposed lease is granted by DMR, I will either open an escrow account or obtain a performance bond, in the amount determined by the lease category.



 Applicant Signature

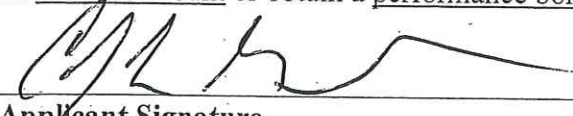
9/19/20

 Date

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

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

I, (printed name of applicant) Clay Gilbert have read DMR Aquaculture Regulations Chapter 2.64(10) (D) and if this proposed lease is granted by DMR, I will either open an escrow account or obtain a performance bond, in the amount determined by the lease category.



 Applicant Signature

9/19/20

 Date

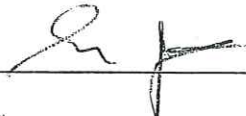
Note: Add title if signing on behalf of a corporate applicant.

18. APPLICANT SIGNATURE PAGE

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

Printed name: Greg Johnston

Title (if corporate applicant): CO-owner

Signature:  Date: 9/18/20

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


Note:

- All applicants must sign and date this page. Please use the space below, if additional signatures are required.
- Corporate applicants, please be sure to include the title(s) (i.e. President, Treasurer, etc.) of the individual(s) signing on the company's behalf.

Additional Applicant:

Printed name: Clay Gilbert

Title (if corporate applicant): CO-owner

Signature:  Date: 9/19/20



MAINE DEPARTMENT OF MARINE RESOURCES
 Aquaculture Division, 21 State House Station, Augusta, ME 04333-0021 (207) 624-6567

CORPORATE APPLICANT FORM
For Standard and Experimental Aquaculture Lease Applications

Corporations or partnerships that apply for aquaculture leases in the State of Maine must complete this form. Corporations must submit information as requested under 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: Pleasant Cove Oyster Farm, LLC

2. Date of incorporation: 3/3/2020 State of incorporation: Maine

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

Name	Address	Title
Greg Johnston	488 Augusta Rd Jefferson Me 04348	co-owner
Clay Gilbert	936 State Rte 129 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
Greg Johnston	488 Augusta Rd Jefferson Me 04348
Clay Gilbert	936 State Rte 129 Walpole Me 04573

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.

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
Greg Johnston	488 Augusta Rd Jefferson Me 04348	50%
Clay Gilbert	936 State Rte, 129 Welpole 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. If none, write, "None."

Name	Address	Lease Acronym	Acreage
N/A			

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.

File No. 20205774DC Pages 2
Fee Paid \$ 175
DCN 2200642310012 DLLC
FILED
03/03/2020

MAINE
LIMITED LIABILITY COMPANY

STATE OF MAINE

CERTIFICATE OF FORMATION

Julie L. Flynn
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:
Pleasant Cove Oyster Farm, 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)

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

Gregory A. Johnston

(Name of noncommercial registered agent)

488 Augusta Road

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

Jefferson, ME 04348

(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

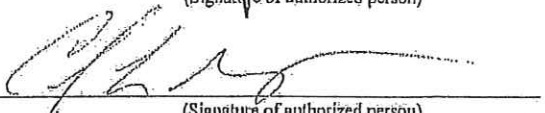
3/3/2020



(Signature of authorized person)

Gregory A. Johnston

(Type or print name of authorized person)



(Signature of authorized person)

Clay L. Gilbert

(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