

PRIVATE SHELLFISH AQUACULTURE REPORT FOR CALENDAR YEAR 2012

A. 2012 INFORMATION:

LICENSE HOLDER'S NAME: Timothy J Broderick

BUSINESS NAME: _____

HOME ADDRESS: 6 Turtle CV Chilmark MA 02535

MAILING ADDRESS: PO Box 45 Chilmark MA 02535

TELEPHONE NUMBER: Home _____ Business _____ Cell 508 524 1223

A.1
2012

Site	Location of Licensed Area	Size (Acres)	Town Designated Site Number	Town License Information	
				Date Issued	Date Expires
1	Menemsha Pond	1.64	# 4	March 2012	March 31 2013
2					
3					
4					
5					

DO YOU SHARE YOUR LICENSE SITE WITH OTHER PERMITTED GROWERS? YES ___ NO X

IF YES, PROVIDE THE FOLLOWING INFORMATION:

A.2
2012

Site	Name of Other Grower(s)	Address	Phone Number
1			
2			
3			
4			
5			

B. LIST ALL 2011 SEED SALES TO OTHER GROWERS BELOW:

SPECIES: _____ PIECES: _____

QUAHOG: _____

OYSTER: _____

SOFT SHELLED CLAM: _____

BAY SCALLOP SEED: _____

OTHER: _____

Signature of Applicant: Timothy J Broderick Date: Dec 26 2012

C.

IF YOU DID NOT HARVEST ANY SHELLFISH IN 2011 PLEASE EXPLAIN.

No, I did not harvest this year. I just put my first 50,000 oysters into cages in November.

D. CULTURE TECHNIQUES USED IN 2012

PLEASE LIST ANY PROBLEMS YOU ARE EXPERIENCING ON YOUR LICENSE (i.e.) MORTALITY, POOR GROWTH, PREDATION, OTHER.

Four horizontal lines for listing problems.

WHAT TYPES OF PROPAGATION TECHNIQUES DO YOU USE ON YOUR AREA FOR GROW OUT PURPOSES?

In Bottom _____ On Bottom _____ Off Bottom _____
Without Protection of Shellfish _____ With Protection _____

What Type of Protection: Netting _____ Netting with frame _____ Other _____
Describe: _____

IF OFF BOTTOM GROW OUT IS USED, PLEASE CHECK.

Box raised off bottom _____ rafts _____ lantern nets _____ cages

other structure suspended in water column

Explain (state dimensions, materials and height above bottom if applicable).

Three horizontal lines for explaining the off-bottom grow out.

SPAT COLLECTION:

Do you use any spat collection techniques. yes _____ no

If so what type. loose cultch _____ cultch bags _____ type of cultch _____

Source of cultch: _____ PVC piping _____ other _____

WHAT METHODS ARE USED TO HARVEST SHELLFISH FROM YOUR AREA?

2012 SEED TRANSPLANT REPORT

DO NOT SUBMIT 2011 INFORMATION ON THIS FORM. USE A SEPERATE SHEET OF PAPER.
 INFORMATION REGARDING SEED PURCHASED AND PLANTED ON PRIVATE LICENSE SITES TO
 BE COMPLETED BY ALL APPLICANTS AT THE END OF THE TRANSPLANT THIS YEAR.

Species Planted	Name of Hatchery/Individual	Amount Purchased	Date Planted	License Site # and Location
AM OYSTER	Atlantic Oysters LLC Todd Stressenger	50,000	NOV 1, 2012	#4 Menemsha Pond

ESTIMATED AMOUNTS OF SHELLFISH PRESENT ON LICENSE SITE AFTER HARVEST

QUAHOGS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

AM. OYSTERS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

ALL INFORMATION FURNISHED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Licensee's Name: Timothy J Broderick

Permit #: 164026
~~8026~~

Signature: [Handwritten Signature]

Date: Dec 26, 2012

ALL 2012 SEED TRANSPLANT REPORTS MUST BE RECEIVED WHEN ALL SEED PLANTING IS COMPLETED AND NO LATER THAN **DECEMBER 1, 2012.**

Please direct all inquires regarding this matter to:

Jerry Moles
 Division of Marine Fisheries
 1213 Purchase St.
 New Bedford, MA. 02740
 508-990-2860 EXT. 129

HAND HELD GEAR: plunger ___ tongs ___ rake ___ hydraulic ___

other(describe) _____

TOWED GEAR:

Non-hydraulic dredge: scallop ___ oyster ___ clam ___ with: chain sweep ___ teeth ___ bar ___ blade ___

Hydraulic: towed ___ escalator ___

D. ANY ADDITIONAL COMMENTS:

PRIVATE SHELLFISH AQUACULTURE REPORT FOR CALENDAR YEAR 2012

A. 2012 INFORMATION:

LICENSE HOLDER'S NAME: STEPHEN B. BRODERICK

BUSINESS NAME: _____

HOME ADDRESS: 6 TURTLE COVE CHILMARK MA 02535

MAILING ADDRESS: 6 TURTLE COVE CHILMARK MA. 02535

TELEPHONE NUMBER: Home 645 9597 Business — Cell 508-560-4994

A.1
2012

Site	Location of Licensed Area	Size (Acres)	Town Designated Site Number	Town License Information	
				Date Issued	Date Expires
1	MEANSHA POND	1.64	#5	3/12	3/31/13
2					
3					
4					
5					

DO YOU SHARE YOUR LICENSE SITE WITH OTHER PERMITTED GROWERS? YES ___ NO X

IF YES, PROVIDE THE FOLLOWING INFORMATION:

A.2
2012

Site	Name of Other Grower(s)	Address	Phone Number
1			
2			
3			
4			
5			

B. LIST ALL 2011 SEED SALES TO OTHER GROWERS BELOW:

SPECIES: _____

PIECES: _____

QUAHOG: _____

OYSTER: _____

SOFT SHELLED CLAM: _____

BAY SCALLOP SEED: _____

OTHER: _____

Signature of Applicant: Stephen B Broderick Date: 12/26/12

C.

IF YOU DID NOT HARVEST ANY SHELLFISH IN 2011 PLEASE EXPLAIN.

NO HARVEST
Recently planted 10,000 in Bags in Nov 2012

D. CULTURE TECHNIQUES USED IN 2012

PLEASE LIST ANY PROBLEMS YOU ARE EXPERIENCING ON YOUR LICENSE (i.e.) MORTALITY, POOR GROWTH, PREDATION, OTHER.

WHAT TYPES OF PROPAGATION TECHNIQUES DO YOU USE ON YOUR AREA FOR GROW OUT PURPOSES?

In Bottom _____ On Bottom _____ Off Bottom X
Without Protection of Shellfish _____ With Protection _____

What Type of Protection: Netting _____ Netting with frame _____ Other _____
Describe: _____

IF OFF BOTTOM GROW OUT IS USED, PLEASE CHECK.

Box raised off bottom _____ rafts _____ lantern nets _____ cages X

other structure suspended in water column

Explain (state dimensions, materials and height above bottom if applicable).

SPAT COLLECTION:

Do you use any spat collection techniques. yes _____ no X

If so what type. loose cultch _____ cultch bags _____ type of cultch _____

Source of cultch: _____ PVC piping _____ other _____

WHAT METHODS ARE USED TO HARVEST SHELLFISH FROM YOUR AREA?

2012 SEED TRANSPLANT REPORT

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Species Planted	Name of Hatchery/Individual	Amount Purchased	Date Planted	License Site # and Location
AM. OYSTER	ATLANTIC OYSTERS Todd Strassenger	10,000	Nov 1 2012	#5 menemsha pond

ESTIMATED AMOUNTS OF SHELLFISH PRESENT ON LICENSE SITE AFTER HARVEST

QUAHOGS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

AM. OYSTERS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

ALL INFORMATION FURNISHED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Licensee's Name: STEPHEN B. BRODERICK

Permit #: 164025

Signature: Stephen B Broderick

Date: 12/26/12

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HAND HELD GEAR: plunger ___ tongs ___ rake ___ hydraulic ___

other(describe) _____

TOWED GEAR:

Non-hydraulic dredge: scallop ___ oyster ___ clam ___ with: chain sweep ___ teeth ___ bar ___ blade ___

Hydraulic: towed ___ escalator ___

D. ANY ADDITIONAL COMMENTS:

2012 SEED TRANSPLANT REPORT

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 BE COMPLETED BY ALL APPLICANTS AT THE END OF THE TRANSPLANT THIS YEAR.

Species Planted	Name of Hatchery/Individual	Amount Purchased	Date Planted	License Site # and Location

ESTIMATED AMOUNTS OF SHELLFISH PRESENT ON LICENSE SITE AFTER HARVEST

QUAHOGS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____
 AM. OYSTERS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) 200,000

ALL INFORMATION FURNISHED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Licensee's Name: Maxwell G. Brown SR Permit #: 143913
 Signature: [Signature] Date: 12-1-12

ALL 2012 SEED TRANSPLANT REPORTS MUST BE RECEIVED WHEN ALL SEED PLANTING IS COMPLETED AND NO LATER THAN **DECEMBER 1, 2012.**

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 Division of Marine Fisheries
 1213 Purchase St.
 New Bedford, MA. 02740
 508-990-2860 EXT. 129

RECEIVED
 FEB - 4 2012

12/1/2012

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