

/2005

Inland Aquaculture Licence Application Form

Please refer to the guide for assistance with completion of the application. Incomplete applications will be rejected. For <u>rainbow trout</u>, please also refer to the N.B. Rainbow Trout Aquaculture Policy for guidelines on rainbow trout culture in N.B.

DAA use - Fredericton					
File #:	Date received:				
Proposed site	Existing site	Amendment to licence			
1.1 Applicant Information: (Plea	ase identify appropriate names and addresses below)				
Name of applicant :					
Postal address:					
P.O. B	ox / Civic # and Street name	Town			
Province	Postal code				
If a business, name of contact person	n and position:				
Work telephone:	Fax #:				
Home telephone:	H mail:				
If applicable, name of agent:					
Postal address:					
Р.О. В	ox / Civic # and Street name	Town			
Province	Postal code				
Work telephone:	Fax #:				
Home telephone:	E-mail:				

1.2	.2 Licence class and Aquaculture activities: (Please check the appropriate boxes)						
1.2	1.2.1 Private Commercial		☐ Institutional Specify purpose:				
1.2.2 For commercial applications: (Specify existing Interpretate of the Interpretate		Intensive culture supplier of live fish Brood stock					
1.3	Existir	ng / Previous approv	als for the aquacultu	re installat	ions		
	1.3.1		stallations related to t of Environment ple				
		ment of Environme	nt	Yes	No	Permit #	Expiry Date
		Alteration Permit	Ovality Deculation				
	Appro	vai under the <i>water</i>	Quality Regulation				
1.4	1.4 Location of aquaculture site & property ownership status: (Please provide the following information)						
	1.4.1	Location of site (town/village/community):					
		·	ation Number (PID):				
		Name of road/stre	et that is used to acce				_
		If culturing rainbow trout, please indicate the rainbow trout culture zone where the site is located:					
	1.4.2 Topographic map no.:						
		A copy of the applicable section of the topographic map (1:50 000) identifying the location of the site must be included. Note: See section 1.4.2 of the Guide for information regarding the topographic map.					
	1.4.3	Are you the owner or lessee of the property where the proposed / existing aquaculture activity is / will be located? If leasing, provide a copy of the lease.					

1.5	Description of facility	: (Please provide the following information)
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1.5.1 Please attach the following (a sample diagram is located in the Inland Aquaculture Licence Application Guide):

	A scaled dimensions (1:500 suggested) with the following information:				
i)	Site boundaries with dimensions				
ii)	All building structures, rearing ponds, settling ponds. For all culture units, provide the number of units and their dimensions				
iii)	Location of water source.				
iv)	Location and distance between the intake and discharge structure and waters receiving discharge.				
v)	Please provide a detailed sketch of the proposed intake structure.				
vi)	Please indicate on the plan any proposed expansion				
vii)	If using surface water supply, provide what distance the structures are from the watercourse.				

1.5.2 For rainbow trout installations:

a) Please provide a detailed sketch of the proposed containment system, such as the triple screen system and where these systems will be located. Refer to Appendix B of the N.B. Rainbow Trout Aquaculture Policy for guidelines on containment standards.

For brood stock facilities, please note any additional security measures which will be in place to prevent theft of brood stock (for example, locked doors, fencing or other).

b) Please provide a detailed written description of the containment measures noted in (a) above (attach a separate sheet).

1.6	Water source information:	(Please provide the following information)
1.0	Water Source Information.	Thease brovide the following information i

1.6.1 Identify the source(s) of water that will be used and the maximum flow that will be required (1 gallon per minute = 4.55 litres per minute):

	Water source	Maximum water	Maximum flow required	Pumped	
	Name	flow available (Litres / min)	for culture use (Litres / min)	Yes	No
1)					
2)					
3)					

1.6.2	a) For operations proposing to use a groundwater source (a well), please identify other users of a
	groundwater source within 250 m.

b)) Please ic	dentify tl	he nature	of the u	ise of the	groundwater	source o	of other	users	noted	in (a)
	above.										

	1.6.3	Are there any other users (including aquaculture facilities) within 1km of the water system you propose to use? If yes, identify the distance and the operator/use. If space provided is insufficient, please provide information as an attachment.				
		Downstream	Distance:		Operator / Use	er:
		Use:				
		Upstream	Distance:		Operator / Use	er:
		Use:				
1.7	Stock	identification: (Plea	ase provide the	e following information)		
	1.7.1			n to culture, including ng Atlantic salmon p		ent stage at the time of purchase ne river strain.
		Species		Supplier(s) and	Address(s)	Development stage
		Example: Brook Trout		XYZ Fish Hatchery Ltd. Sussex, NB		7.6 cm (3") feeding fry
	1.7.2	For rainbow trout, please indicate the type of ploidy you wish to culture: Note: Refer to the N.B. Rainbow Trout Aquaculture Policy for guidelines regarding which stocks are permitted based on the culture zone location.				
		diploid all fem	nale stock			
		triploid all fen	nale stock			
		triploid stock	(mix of fema	ale and male)		
		a combination	of the abo	ve. If so, please spec	rify	
	1.7.3	What is the maxir	num numb	er and average size o	f all your classe	es that will be held at the site?
			Number			Size
		Example: 2	2000			300 grams (3/4 lb)
	1.7.4	What is the maxing	num daily	amount of feed in kil	ograms:	kgs.

1.8 Applicant's signature: (Please sign your name in the space below)				
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Signature:		Dated:		
	Applicant			
	For regional	office use only		
Aquaculture application fee receiv	ed: \$	Receipt #:		
requaeuture application rec receiv	<u></u>			
Received by:		Dated:		
Applications for aquaculture licer	uses should be subm	itted to the Department of Agriculture and Aquaculture		
		Il be located. The regional offices of the Department of		
Agriculture and Aquaculture are	listed below, along	with their mailing and shipping address. The counties		
served by the different offices are	indicated as well.			
Fundy Region				
Counties (Region 3)	Victoria	Carleton		
(region b)	York	Sunbury		
	Charlotte	Queens		
	Kings	Saint John		
Please return to:	Department of Agriculture and Aguaculture			
r lease return to.	P.O. Box 1037	Department of Agriculture and Aquaculture P.O. Box 1037		
	107 Mount Pleasar	nt Road		
	St. George, NB E.			
E (C (P)				
East Coast Region Counties (Region 1)	Madawaska	Gloucester		
Counties (Region 1)	Restigouche	Northumberland, north side of Miramichi River		
	8			
Please return to:		riculture and Aquaculture		
	100, Aquarium Str			
	Shippagan, NB E	8S 1H9		
Counties (Region 2)	Westmorland	Kent		
, 5	Albert	Northumberland, south side of Miramichi River,		
		including parish of South Esk		
Please return to:	Department of Acr	riculture and Aquaculture		
i icase ictuiii to.	P.O. Box 760, 26	•		
	Rouctouche NR F4S 2T2			

Application Fees

Please enclose your \$10 application fee. Your cheque or money order must be made payable to the MINISTER OF FINANCE.