tSubmit Completed Annual Report to:

By Mail: Aquatic Farming

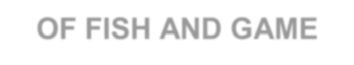
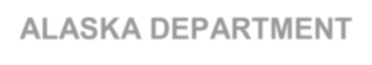
Alaska Department of Fish and Game Division of Commercial Fisheries

P.O. Box 115526 Juneau, AK 99811-5526

By Ema[il: cynthia.pring-ham@alaska.gov](mailto:cynthia.pring-ham@alaska.gov) By Fax (907) 465-4168

Questions?

Call (907) 465-6150



**ALASKA DEPARTMENT** **OF FISH AND GAME**

**STATE OF ALASKA AQUATIC FARMING** **ANNUAL REPORT**

Refer to general instructions document for details on filling out each

section. Use tab button to go through each fillable field and drop down box.

**\*\*\* CONFIDENTIAL \*\*\***

**OPERATING YEAR: (**specify year**)**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERMIT HOLDER/OPERATOR INFORMATION** | | | |
| ADF&G Permit No: DFG –  DNR Lease: ADL | | Site Name: | |
| Permit Holder Name: | | Alt. Contact Name: | |
| Company Name: | | Alt. Contact Street: | |
| Street: | | Alt. Contact City, State, Zip: | |
| City, State, Zip: | | Alt. Contact Telephone Number: | |
| Telephone Number: | Cell Number: | Alt. Contact Telephone No.: | Alt. Contact Cell No: |
| Email: | Fax: | Alt. Contact E-Mail: | Alt. Contact Fax: |
| **CERTIFICATION*:*** Please be sure that you have reviewed all information in the remaining pages of this report before signing the following statement :  **I certify that the information provided in this annual report herein is accurate and true.**      (print) (signature) (date) | | | |

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| **SPECIES APPROVED FOR CULTURE ON OPERATION PERMIT**  (Note: Each species must have separate production and inventory summary sheets.) |

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ADF&G Operation Permit Number: Permit Holder: DNR Lease ADL:

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| **SPECIES** (Select one species from the drop down list that corresponds to the production and inventory data below) |

**Cassotrea gigas - Pacific oyster For Other Species Not Listed Only:**

|  |  |  |
| --- | --- | --- |
| **PRODUCTION SUMMARY (calendar year)** | | |
| **Amount Sold** | | **Total Value ($)** |
|  | **(Select Units)**  Animals |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INVENTORY SUMMARY** | | | | | |
| **Month** | **New Seed Acquired (Numbers Only)** | **Source of New Seed** | **Transport Permit No.**  **(XXXX-XXX-TP-XX)** | **Estimated Mortality (No. of animals)** | **Inventory**  **(Select Units)**  List |
| **Jan** |  |  |  |  |  |
| **Feb** |  |  |  |  |
| **Mar** |  |  |  |
| **Apr** |  |  |  |
| **May** |  |  |  |
| **Jun** |  |  |  |
| **Jul** |  |  |  |
| **Aug** |  |  |  |
| **Sep** |  |  |  |
| **Oct** |  |  |  |
| **Nov** |  |  |  |
| **Dec** |  |  |  |  |
| **YEARLY TOTALS** | ***Total New Seed*** |  |  | ***Total Mortality Nos.*** | ***Total Inventory End of Year\**** |
|  |  |  |
| **\* Beg. January inventory + total new seed acquired – total mortality estimate – total number sold = Total Inventory EOY** | | | | | |

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| **PRODUCTION AND INVENTORY COMMENTS** (If you did not achieve your operation and development production goals for the year, please explain why your goals were not met (Ex: weather damage, fouling, predation, growth and survival, recruitment, vandalism, conflicts with other user groups, farm equipment, seed acquisitions, etc.). |

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**ADF&G Operation Permit Number: Permit Holder:**   **DNR Lease ADL:**

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| **CURRENT - SUPPORT FACILITIES, EQUIPMENT, AND GEAR SUMMARY**  If there was a change in the reported support facilities, equipment, and gear listed above during the year, please provide an update of structures onsite at the end of the year in the sections below. |

|  |  |  |
| --- | --- | --- |
| **SUPPORT FACILITIES** NO SUPPORT FACILITES ONSITE IN THE YEAR 🞏 | | |
| **Number** | **Size (Dimension in ft.)** | **Type (processor, work float, etc)** |
|  |  |  |
|  |  |  |
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| --- | --- | --- |
| **EQUIPMENT** | | |
| **Number** | **Size (Dimension)** | **Type**  **(logs, grow-out rafts, longlines, buoys, etc.)** |
|  |  |  |
|  |  |  |
|  |  |  |
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| --- | --- | --- |
| **GEAR** | | |
| **Number** | **Size (Dimensions)** | **Type**  **(cages, trays, lantern nets, predator netting, etc.)** |
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|  |  |  |
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| **FACILITIES, EQUIPMENT, AND GEAR SUMMARY COMMENTS**  Explain what was added or removed, or why there was none installed. |

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**ADF&G Operation Permit Number: Permit Holder:**   **DNR Lease ADL:**

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| **ADDITIONAL COMMENTS ON YOUR FARM OPERATIONS** (Reference section number if continuing) |

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