

Fish Program
Grass Carp Stocking Recommendation

PERMIT # 2008-4046

APPLICANT NAME Frank Buchanan PHONE: 360-378-5091
ADDRESS: 98 Boyce Rd Friday Harbor WA 98250
LEGAL DESCRIPTION: Private Pond COUNTY San Juan
SEC: 17 TWP: 35 RNG: 3W Surface Area: 2 Maximum Depth: 10

Area Fish Biologist Recommendation

Approve Deny

Comments *Site visit was performed on Jan 12, 2012 by Justin Spinelli (Fish Bio) & Brendan Brokes (Habitat Bio). There is no concern that fish will emigrate into public waters of the state.*


Area Fish Biologist Signature

January 13, 2012
Date

Fish Program Manager Recommendation

Local Wildlife Program notification date _____

Local Habitat Program notification date _____

Approve Deny

Comments


Fish Program Manager Signature

1/20/12
Date

WASHINGTON DEPARTMENT OF FISH AND WILDLIFE
Application for Planting Triploid Grass Carp

RECEIVED

JUL 22 2008

Dept. of Fish & Wildlife
Creek Regional Office

1. Name of Applicant or Organization FRANK BUCHANAN
2. Address 98 Boyce Road Day Phone: 360-378-5091
Friday Harbor WA
3. Name of Lake or Pond to be Planted: NO NAME
4. County: SAN JUAN Township: 35 Range: 3^W Section: 17

Note: A photocopy of a county map showing rivers and streams at the proposed planting location MUST be provided with this application.

5. Size of lake or pond (1 acre= 208 X 208 ft.) 2 ACRES Max Depth (ft) 10'
6. Does this pond or lake have public access provided by the city, county, state or federal government or other publicly owned municipality? YES NO X
- (Answer "NO" for golf course, sewage treatment or fish culture ponds and power or irrigation canals).
If you answered "NO", go to #8
7. If you answered "YES" to number 6, are the results of a Lake Restoration Feasibility Study included?
YES NO

If you answered "YES" go to # 10 and skip #11.

If you answered "NO", a permit cannot be issued until the standards for a lake restoration study have been met. Please contact your local WDFW regional office to proceed with this study.

8. Total number of waterfront property owners: 1
9. Number of waterfront property owners that support 1 or oppose 0
Proposed planting of triploid grass carp.

Note: The names, addresses and phone numbers of all waterfront property owners and whether or not they support the proposed grass carp introduction MUST be provided with this application.

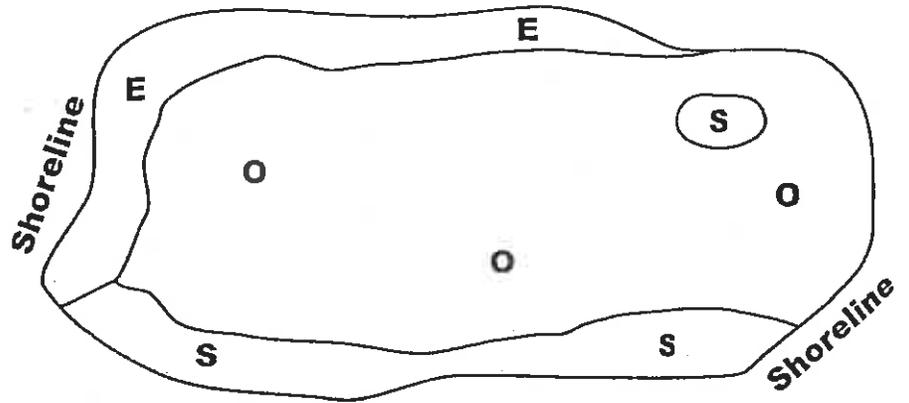
10. Have all outlets and/or inlets been screened? YES X NO
- If you answered "NO" you must apply for a Hydraulic Project Approval (HPA) before installing screens. **The Department of Fish and Wildlife will not issue a permit to plant triploid grass carp into waters with unscreened outlets.** If the proposed lake or pond is greater than 20 acres, other permits from the county of jurisdiction may be required to install screens. Please contact your Department of Fish and Wildlife Regional Office for additional direction on this requirement.
11. Please draw a map of the lake or pond as close to scale as possible on the attached sheet. Draw in vegetation types that are present. This map will assist our biologists in determining how many fish to plant into your pond or lake.

Signature of Applicant Frank Buchanan Date 7/21/08

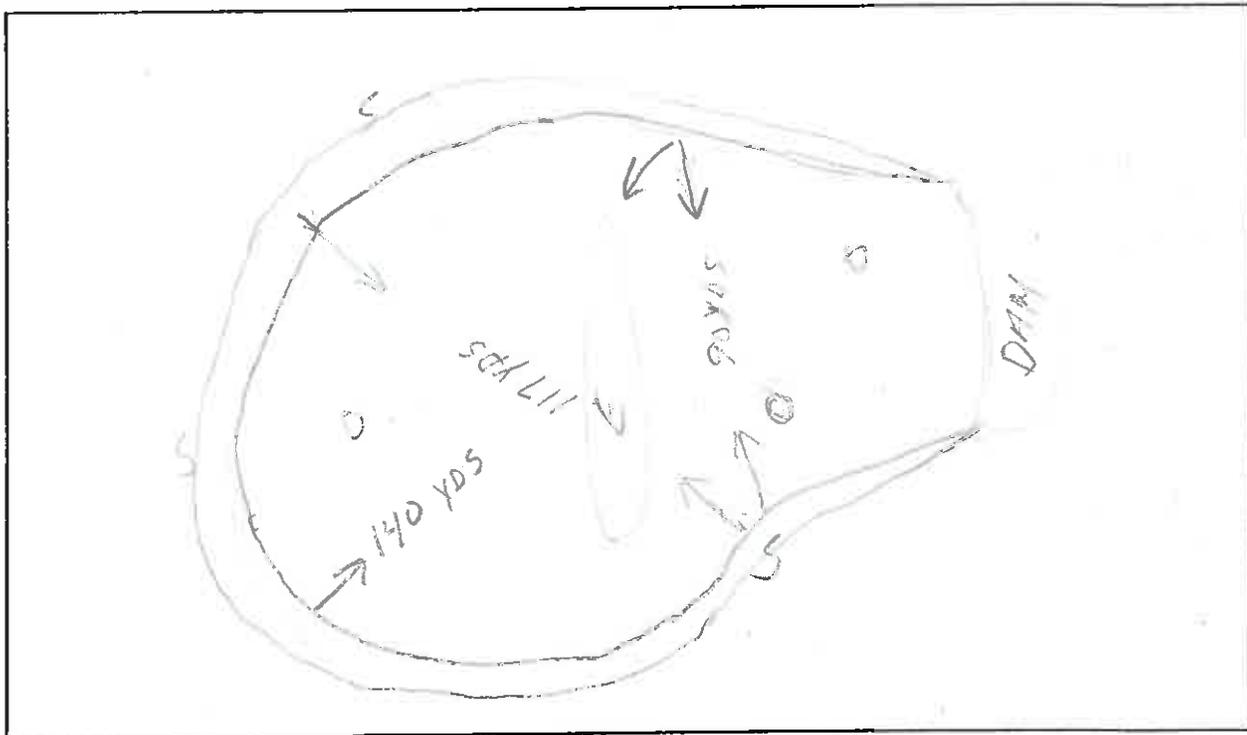
MAP OF LAKE OR POND

Please include distribution of each vegetation type. Irrigation and power canal applicants need only provide estimated acres of each plant type.

Please use the space below to draw a map of your water as close to scale as possible. Also draw in the approximate areas that are covered by each type of plant and properly label each. Plant coverage estimates should be made in July or August or from your best recollection of that time period.



E- Emergent Plants
S- Submerged Plants
O- Open Water



Name of Applicant Frank Buchanan

Name of Lake or Pond NO NAME



PERMIT #: REG /YR /MO
 WASHINGTON DEPARTMENT OF FISH AND WILDLIFE
 600 CAPITOL WAY NORTH
 OLYMPIA, WASHINGTON 98501-1091

NO RECEIVED

JUL 23 2008

Dept. of Fish & Wildlife
 Central Regional Office

FISH TRANSPORT APPLICATION/PERMIT

To Import, Export, Transfer, or Stock Live Fin Fish, Viable Eggs or Gametes
 (Please print or type Items 1-5)

- Type of application: Import Export Transfer Stocking (Fee: \$24.00)
- Name of Applicant Frank Buchanan Phone number 360 378-5091
 Mailing address 98 Boyce Road City Friday Harbor State WA Zip 98250
 WDFW Aquatic Farm Registration # (for commercial aquaculture facilities only) _____
- Species Grass Carp Number (fish or eggs) ?
- Destination (name of facility/receiving waters) _____
 County SAN JUAN Sec. 17 Twship. 35 Rng. 3 W.
- Source of fish/eggs: Facility name _____ Phone number () _____
 Physical Location _____ City _____ State WA Zip _____
 Mailing Address _____ City _____ State WA Zip _____
 WDFW Aquatic Farm Registration # (for commercial sources in Washington) _____
- Stocking Fee \$24.00. Refundable if application is not approved.
- Applicant's Signature Frank Buchanan Date 7/22/08

NOTE: It is unlawful to transport or stock fish without a permit issued by the Director or his/her designee. Failure to comply with any provisions of this permit or to perform any act not included in this permit shall be grounds for revocation of this permit and shall constitute a gross misdemeanor.

INFORMATION BELOW TO BE COMPLETED BY WDFW PERSONNEL

Provisions:

Additional provisions attached

Expiration date _____

Stocking Permits Only:

These fish may be taken by any person possessing a legal fishing license and in conformance with seasons, bag limits, and rules established by the Washington State Fish and Wildlife Commission.

This permit will allow the taking of these legally obtained and stocked fish without controls of bag limits, seasons, license requirements and is limited to personal use only.

Approved Not approved Regional Fish Prog. Manager _____ Date _____
 (For stocking permit only. If source is WDFW certified, no additional signatures required)

Approved Not approved Fish Health Manager _____ Date _____

Approved Not approved Aquaculture Coordinator _____ Date _____