



Washington
Department of
**FISH and
WILDLIFE**

SHELLFISH TRANSFER PERMIT

Please refer to the **SHELLFISH TRANSFER PERMIT SUPPLEMENTAL INFORMATION** (separate document) for completing this application. This form must be used, typed, and all sections be completed. Incomplete applications will be returned and result in a delay in the issuance of your permit.

E-mail, mail, or fax applications and applicable attachments to:

Paul Clarke (Paul.Clarke@dfw.wa.gov) or Brady Blake (Brady.Blake@dfw.wa.gov)

Washington Department of Fish and Wildlife

375 Hudson Street

Port Townsend, WA 98368

FAX (360) 302-3031

SECTION A: APPLICANT INFORMATION

Company or Organization Name:

City, State, Zip:

Applicant Name:

Telephone:

Mailing Address:

FAX:

Physical Address:

E-mail:

SECTION B: TRANSFER INFORMATION

Purpose: Commercial Non-commercial Research Display

Is this application for a new permit: Yes No

If a renewal of a previous permit provide previous permit #:

Is the transfer shell or cultch: Yes No If yes, provide source:

Species Proposed for Transfer (Common and/or Latin Name):

Life Stage Proposed for Transfer:

Are these oysters, shellfish, or invertebrates from stock imported from out of state within the previous five years? Yes No If yes, previous permit #:

Property from which applicant desires to make transfer. Please list the general area (for example, Dabob Bay) and the specific location (tax parcel #-preferred but not required). Please note that in some cases, further information from the applicant may be required.

Property to which applicant desires to make transfer. Please indicate off-loading area(s) if different from final destination. Please list the general area (for example, Dabob Bay) and the specific location (tax parcel #-preferred, but not required). Please note that in some cases, further information from the applicant may be required.

Purpose of transfer. Please indicate if animals will be transferred to opening house, growing area, seeding area, etc. Also indicate special details or comments concerning transfer methods and all intermediate transfer points:

Description of all equipment including vessel name(s), registration number(s), and license plate number(s) of road vehicles:

Additional names of employees, staff, or persons to be listed on the permit:

Will shell be returned to marine waters? Yes No If yes, location:

SECTION C: TIME PERIOD OF TRANSFER

Beginning:

Ending:

SECTION D: AQUATIC FARM REGISTRATION

Is this transfer related to commercial aquaculture or harvest: Yes No

Is this transfer being made to create a new (previously non-existing) cultivated shellfish bed? Yes No

If answer is "yes", to any of the above, you must provide relevant Aquatic Farm Registration (AFR) number(s) with detail showing the AFR parcel(s) from which shellfish, seed, or shell will be removed and/or the AFR parcel(s) to which shellfish, seed, or shell will be planted (attach list if necessary).

AFR Number:

Important! For purposes of this application, shellfish cultivation involves the “culture of aquatic products” and generally includes efforts to cultivate shellfish via planting and/or other activities like gravelling or predator control to enhance the productivity of any area whether or not it includes some natural set of shellfish. Be advised that if you are establishing a new shellfish cultivation bed there is a separate duty to comply with the Shellfish Implementation Plan (SIP), entered as a court order in United States vs. Washington, in order to ensure that shell-fishing rights of Puget Sound Treaty Tribes are given due consideration. Section 6 of the SIP requires commercial shellfish growers to provide affected tribes with certain advance notices prior to establishing new cultivation beds and provides processes for growers and tribes to work together to develop any required management plans for shared harvest.

RCW 77.60.080, RCW 77.60.060, WAC 220-340-150, WAC220-340-050, and WAC 220-370-200 require all transfers and imports be accompanied by a permit issued by the Director of Fish and Wildlife or his agent.

ACCEPTANCE

By checking this box, the permittee agrees to abide by the conditions set forth in any Shellfish Transfer Permit issued by the Washington Department of Fish and Wildlife. The permittee acknowledges that they have read and understand the requirements outlined in the Shellfish Transfer Permit Supplemental Information packet (separate document).

Name:

Date: