

ANNUAL SHELLFISH MANAGEMENT REVIEW

Municipality: _____ Date of Submission: _____

For the period: January 1 to December 31, _____

The Shellfish Conservation Committee needs to submit the following information in partial fulfillment of the town's responsibilities as outlined in Chapter 7 of the DMR Regulations and the Town's shellfish ordinance. A complete Budget Worksheet must accompany this report.

SHELLFISH COMMITTEE / STAFF

CHAIR NAME: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

VICE CHAIR: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

SECRETARY: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

MEMBER: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

WARDEN: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

WARDEN: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

SELECTMAN/ COUNCIL REP.: _____ **ADDRESS:** _____

PHONE: _____ **EMAIL:** _____

Municipality: _____

COMMITTEE MEETINGS

The Committee holds regularly scheduled meetings (once a month etc.): YES _____ NO _____

Number of meeting held during the reporting period: _____

The minutes of meetings are recorded and available on request: YES _____ NO _____

STATEMENT OF MANAGEMENT GOALS AND IMPLEMENTATION ACTIONS

The goals of the shellfish management for this municipality during the reporting period were (pick one in each category that best describes the municipal program):

- 1. Provide open licenses to maximize opportunity
 Limit licenses to maximize individual harvest
- 2. Conduct enhancement activities to increase resources
 Use closures and harvest limits to maintain resource levels
- 3. Emphasize recreational harvest
 Emphasize commercial harvest

The following management controls were utilized (check all that apply):

- 1. Limited the number of commercial harvesters
- 2. Limited the number of recreational harvesters
- 3. Restricted the times of harvest (seasons, days off etc.)
- 4. Restricted the areas of harvest (conservation closures etc.)
- 5. Limited the amount of commercial harvest (daily harvest limit)
- 6. Limited the amount of the recreational harvest (daily harvest limit)

The following management activities were undertaken (check all that apply):

- 1. Predator protection using fencing, netting, trapping etc.
- 2. Reseeding from wild or hatchery stock
- 3. Surveys of flats to determine resource abundance
- 4. Collection of catch data from harvesters
- 5. Enhancing natural seeding using brushing, roughing etc.
- 6. Utilizing flat rotation through conservation closures

Municipality _____

CONSERVATION CREDITS

Conservation credits are required: YES _____ NO _____

If NO are volunteer hours logged: YES _____ NO _____

Conservation credits are required for: RENEWAL _____ NEW LICENSE _____

Number of conservation credits required annually: _____

The total number of conservation/volunteer hours during the reporting period:
(Please include total number of Participants) HOURS _____ PARTICIPANTS _____

A reduced license fee is offered with earned conservation time: YES _____ NO _____

Opportunities are provided for earning required conservation credits
(surveys, meeting attendance etc.): YES _____ NO _____

Conservation credits earned for this year were (Check all that apply):

- Reseeding
- Surveys
- Brushing
- Predator Control
- Education activities
- Coastal Cleanup
- Other _____

WARDEN ACTIVITY REPORT (from Warden Enforcement Worksheet)

The Municipal Shellfish Warden is provided a written job description: YES _____ NO _____

Hours patrolled during report period: _____

Number of harvesters checked during report period: _____

Number of warnings issued during report period: _____

Number of summons issued during report period: _____

Number of court appearances during report period: _____

Number of convictions during report period: _____

Enforcement can be improved by (check all that apply):

- More Hours
- Additional Staff
- More Training
- Greater State Support
- Better Equipment
- Other _____

Municipality _____

WARDEN ANNUAL APPOINTMENT

WARDEN: _____

REAPPOINTMENT: _____ NEW HIRE*: _____ TOWN CLERK SIGNATURE: _____

WARDEN: _____

REAPPOINTMENT: _____ NEW HIRE*: _____ TOWN CLERK SIGNATURE: _____

*** - If the warden is a new hire the candidate must fill out a NEW WARDEN FORM found at:**

<https://www.maine.gov/dmr/fisheries/shellfish>

SUMMARY OF CONSERVATION ACTIVITIES

CONSERVATION CLOSURES

_____ No Closure Conservation Closures were requested this year.

The following conservation closures were implemented during the review year:

CLOSURE DESCRIPTION/LOCATION	DATE CLOSURE	DATE OPEN

Summary of Transplant Activities

Municipality:

The following seeding / reseeding activities were conducted during the past year.

No seeding / reseeding activities were conducted.

	Event 1	Event 2	Event 3	Event 4
Date (m/d)				
Supervisor				
Crew #				
Amount				
Mean Size (mm)				
Size Range (mm)				
Source Hatchery				
Source Flat				
Receiving. Flat				
Flat Prep (y/n)				
Netted (y/n)				
Closed until				
	Event 5	Event 6	Event 7	Event 8
Date				
Supervisor				
Crew #				
Amount				
Mean Size (mm)				
Size Range (mm)				
Source Hatchery				
Source Flat				
Receiving. Flat				
Flat Prep (y/n)				
Netted (y/n)				
Closed until				

Municipality: _____

SPATFALL ENHANCEMENT

_____ No spatfall enhancement activities were conducted during the review year.

Please list activities undertaken to promote settlement such as brushing, flat roughening, tenting or shell on flats.

LOCATION	DATE	DESCRIPTION

Municipality _____

PREDATOR REDUCTION

_____ No predator protection activities were conducted during the review year.

Please list activities undertaken to protect clams from predators such as trapping, netting and hand collection.

LOCATION	DATE	DESCRIPTION (Species targeted and method)

CLAM FLAT SURVEYS

_____ No population surveys were conducted during the review year.

All survey data should be forwarded to the proper DMR Area Biologist. Please list the surveys conducted during the review year. DMR will not accept surveys without data.

CLAM FLAT	SURVEY DATE	DATA PROVIDED TO DMR	MAP PROVIDED TO DMR
		Yes _____ No _____	Yes _____ No _____
		Yes _____ No _____	Yes _____ No _____
		Yes _____ No _____	Yes _____ No _____
		Yes _____ No _____	Yes _____ No _____
		Yes _____ No _____	Yes _____ No _____

The flats surveyed during the review year represent approximately _____% of the total productive flats.

Municipality _____

ADDITIONAL ACTIVITIES

_____ No other activities were conducted during the review year.

Please list other activities undertaken to benefit the shellfish conservation program such as education, participation in regional councils and shoreline clean-up.

LOCATION	DATE	DESCRIPTION

PROPOSED MANAGEMENT ACTIVITIES

The following management activities will be undertaken during the coming year (check all that apply):

- Predator protection through netting, trapping and etc.
- Reseeding from high density areas or with hatchery stock
- Flat surveys to determine size distribution and density
- Enhance natural seeding through brushing, roughing and etc.
- Establishing conservation areas for flat rotation
- Other _____

In order to implement these management activities the committee will utilize (check all that apply):

- Harvesters vested with conservation credit
- Harvester volunteers
- Paid harvesters
- Municipal employees
- Paid consultants
- Other _____