

RESTORATION AND MANAGEMENT OF RARE OR DECLINING HABITATS OYSTER BED RESTORATION CODE 643

Maryland Conservation Practice Implementation Requirements and Certification

Cooperator Name	County	Planner	Date
Farm/Tract/Field(s)	Program/Contract No. (if applicable)		Amount Planned AC
License Type <input type="checkbox"/> Unlimited Tidal Fish (TFL) <input type="checkbox"/> Commercial Oyster Harvester (OYH) <input type="checkbox"/> None			

Site Information	
Size of Lease/Bed: acres	Name of Waterway:
Water depth at mean lower low water: Min ft Max ft (i.e. range over lease/bed area. Available from NOAA Navigation Charts.)	
Type of Control: <input type="checkbox"/> Lease <input type="checkbox"/> Riparian Rights <input type="checkbox"/> Other:	
Substrate: <input type="checkbox"/> Cultch <input type="checkbox"/> Mud with cultch <input type="checkbox"/> Sand with cultch <input type="checkbox"/> Hard bottom <input type="checkbox"/> Mud <input type="checkbox"/> Sand	
MDE Shellfish Growing Waters classification: <input type="checkbox"/> Approved <input type="checkbox"/> Conditionally Approved <input type="checkbox"/> Restricted If the area is restricted, identify relay location and plan for relay:	
Implementation Plan	
Restoration Method <input type="checkbox"/> Dredging, no seeding <input type="checkbox"/> Dredging and seeding <input type="checkbox"/> Dredging/purchasing shell and seeding <input type="checkbox"/> Purchasing shell and seeding	Types of Eastern Oyster to be Cultivated <input type="checkbox"/> Diploid wild <input type="checkbox"/> Diploid disease-resistant <input type="checkbox"/> Triploid Percentage: (maximum of 30%)
Type of Shell for Base <input type="checkbox"/> Oyster shell <input type="checkbox"/> Clam shell	Source of Spat on Cultch <input type="checkbox"/> Purchased Source of Spat: <input type="checkbox"/> Remote Setting
Implementation Dates Restore/rehabilitate oyster bed: Seed bed:	Seeding Quantity Number of spat per acre: <i>Minimum of 1 million spat/acre</i>
Describe location of the land base that will be used to support this aquaculture project (i.e. private pier, commercial landing:	

Describe the proposed activities on the lease site, including any and all methods that will be used for shellfish cultivation, maintenance, and predator control:

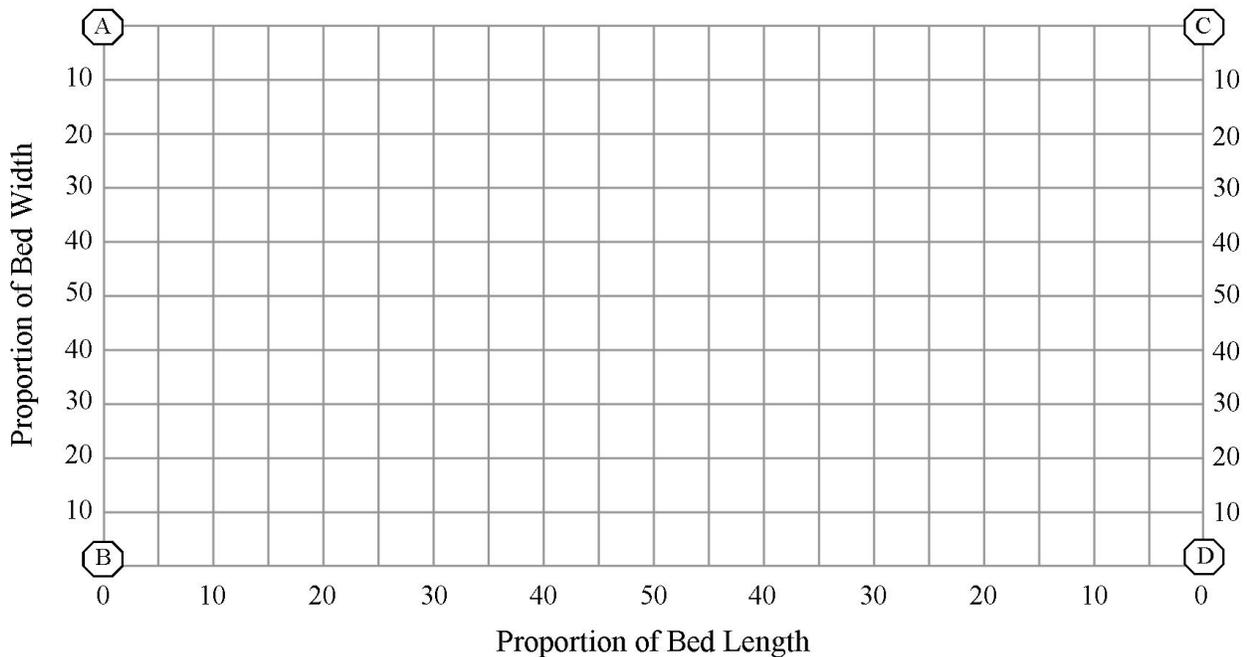
Describe the labor, harvesting methods, and harvesting equipment to be used:

Operation and Maintenance

The State of Maryland requires all bottom leaseholders to work at least 25 percent of the lease each year. In working the lease, the leaseholder is maintaining the productivity of the oyster bar. Operators shall maintain their oyster bars utilizing accepted practices and activities, including dredging, tonging, culling, and shell and spat on cultch supplementation.

PLAN VIEW OF OYSTER BED

Identify the area of the lease/bed that will be restored. Assume the bed is rectangular and has the corners A, B, C, and D. Shade or cross-hatch the portion that will be restored. (May be provided on separate map or sheet.)

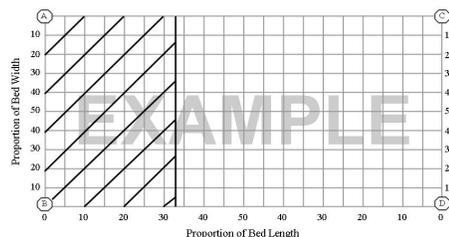


Enter the lat/long coordinates for corners of the lease or bed area:

A: N W C: N W
 B: N W D: N W

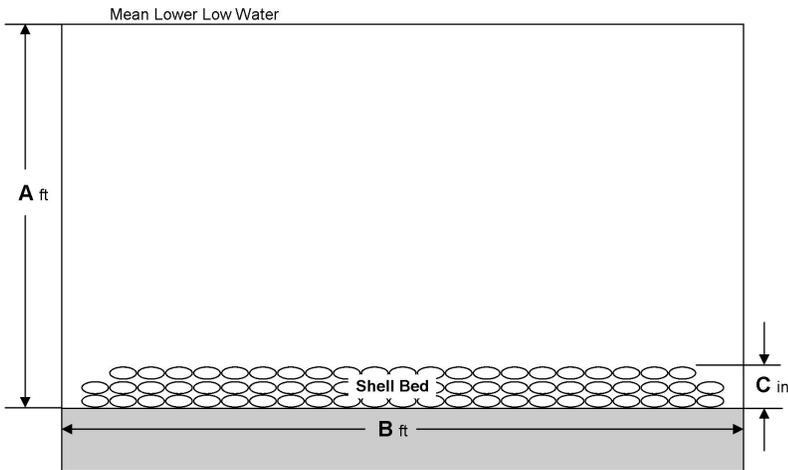
EXAMPLE

In the example on the right, the cooperators would be identifying approximately 1/3 of the lease/bed area to be restored. The restored area would consist of 1/3 of the length and the full width, and would be located on the side of the lease with corners A and B.



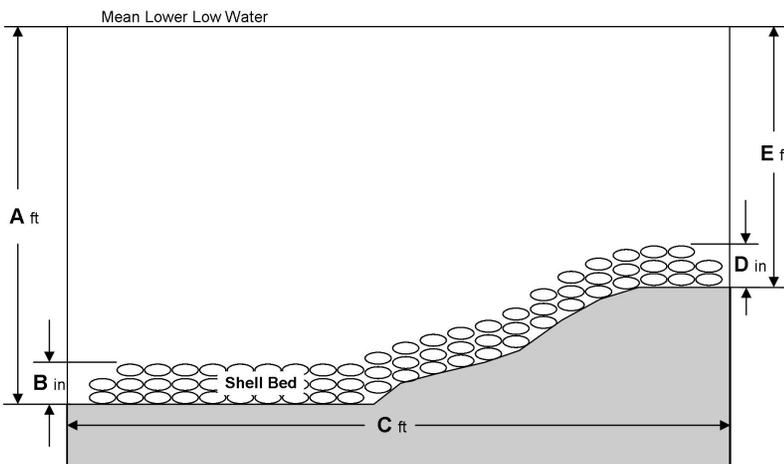
CROSS SECTION DIAGRAM OF OYSTER BED

Constant Bottom Depth



A = ft
 B = ft
 C = ft

Variable Bottom Depth



A = ft
 B = ft
 C = ft
 D = ft
 E = ft

Near-shore side is:
 Lower side Higher side

CERTIFICATION (FOR AGENCY USE ONLY)

Supporting Documentation (for file)

Map showing practice location

Copy of approved lease

Planning Certification

This practice was planned according to NRCS standards and specifications.

Job Class: _____

Signature by individual with appropriate JAA Date _____

Implementation Certification

This practice was applied according to NRCS standards and specifications.

Amount: _____ Date: _____

Signature by individual with appropriate JAA Date _____

Reporting Checklist

CPA-06 Notes

Report in Toolkit

File copy of completed IR sheet

Other reporting tools (optional)

COOPERATOR RECORD-KEEPING

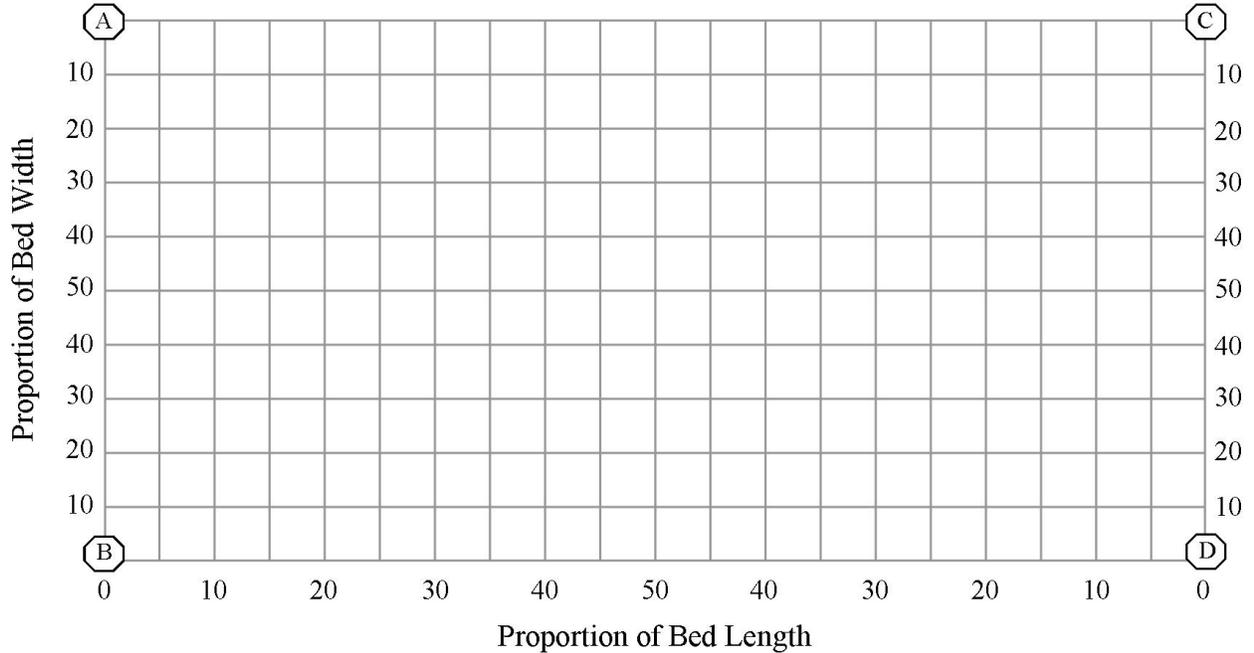
Instructions: Cooperators should utilize this section of the job sheet to record the amount, methods, and timing of oyster bed restoration, as well as the quantities and sources of materials.

Name:				
County:			Farm and Tract No:	
Restored Acres:				
Types of Eastern Oyster Diploid wild Diploid disease-resistant Triploid: Percentage: (maximum of 30%)				
Restoration Method Dredged, not seeded Dredged and seeded Dredged, placed purchased shell, and seeded Placed purchase shell and seeded			Type of Shell for Base Oyster shell Clam shell Source of Spat on Cultch Purchased Remote Setting	
Activity Implementation Dates				
Check the box next to the activity when it is completed, and record the quantity and date of implementation. Not all activities are required for every restoration method.				
Completed	Activity	Quantity	Units	Date Implemented
<input type="checkbox"/>	Dredged shell		bushels (estimated)	
<input type="checkbox"/>	Purchased shell		bushels	
<input type="checkbox"/>	Placed shell		acre-inch	
<input type="checkbox"/>	Purchased larvae		number	
<input type="checkbox"/>	Purchased/acquired spat on cultch		bushels	
<input type="checkbox"/>	Seeded bar		spat/acre	
Sources of Materials				
Material	Source			
Purchased Shell				
Larvae				
Spat on Cultch				
Additional Comments				
Provide any additional comments about the restoration activities:				

COOPERATOR RECORD-KEEPING

PLAN VIEW OF RESTORED OYSTER BED

Identify the area of the lease/bed that was restored. Assume the bed is rectangular and has the corners A, B, C, and D. Shade or cross-hatch the portion that was restored. (May be provided on separate map or sheet.)



Enter the lat/long coordinates for corners of the lease or bed area:

A: N W C: N W
 B: N W D: N W

EXAMPLE

In the example on the right, the cooperators would be identifying approximately 1/3 of the lease/bed area as restored. The restored area would consist of 1/3 of the length and the full width, and would be located on the side of the lease with corners A and B.

