

# VMRC TECHNICAL APPLICATION CHECKLIST – FY 24

Restoration of Rare or  
Declining Natural Communities (643)

Virginia Oyster Bottom Restoration



CONTACT INFORMATION		
Name		
Mailing Address		
Phone number	email	
County		
AQUACULTURE TRACK RECORD		
Experience in aquaculture:    ___ 1 year or less    ___ 2 to 3 years    ___ more than 3 years		
VMRC TRACK RECORD		
MRC ID #:		
<b>Do you hold a Commercial Oyster Harvester License?</b> <i>(required for public oyster fishery participation)</i>	___ Yes    ___ No	<i>MRC Use Only</i> ___ Yes    ___ No
<b>Do you hold an Oyster Aquaculture Product Owner Permit?</b> <i>(*note, you are not required to have both)</i>	___ Yes    ___ No	___ Yes    ___ No
<b>Are you compliant with MRC's mandatory harvest reporting system?</b>	___ Yes    ___ No	<i>MRC Use Only</i> ___ Yes    ___ No
<b>Is the lease appropriately marked per <a href="#">VMRC regulation</a>?</b>	___ Yes    ___ No	<i>MRC Use Only</i> ___ Yes    ___ No
<b>Do you have any VMRC permitting violations in the last 5 years?</b>	___ Yes    ___ No	<i>MRC Use Only</i> ___ Yes    ___ No
<b>Do you have any VMRC fishing violations in the last 5 years?</b>	___ Yes    ___ No	<i>MRC Use Only</i> ___ Yes    ___ No

<b>SITE INFORMATION</b>		
Lease number _____	Total lease acres _____ Lease acres for restoration _____	
Waterbody _____	Average Salinity (ppt) _____	
Growing Area Classification: _____ Approved _____ Conditionally Approved _____ Restricted		
Bottom Type: _____ Mud with cultch _____ Sand with cultch _____ Hard bottom _____ Mud _____ Sand		
Water Depth (at mean low water): _____ minimum ft _____ maximum ft		
<b>IMPLEMENTATION PLAN - BASE</b>		
<b>Base Restoration Type:</b> _____ Restoring bed - requires a minimum of 3 inches of cultch (3,000 – 5,000 bu. shells/acre or 500 tons/ acre of alt. substrate) _____ Enhancing bed - requires a minimum of 2 inches of cultch (1,000 – 3,000 bu. shells/acre or 333 tons/ acre of alt. substrate)		<b>Estimated Implementation Date for Base Planting (Month(s)/Year):</b>  
<b>Base Restoration Method:</b> _____ Shell only <i>*only in VMRC-designated high recruitment area</i> _____ Stone only <i>*only in VMRC-designated high recruitment area</i> _____ Shell with living overlay of spat on shell (SOS) _____ Stone with living overlay of spat on shell (SOS)		<i>MRC Use Only</i> _____ Spat on Shell Required _____ Spat on Shell Optional _____ Spat on Shell Not Required (area is designated high-recruitment)
<b>Type of Restoration/Base Material:</b> _____ Oyster shell _____ Clam shell _____ Conch shell _____ Stone <b>*JPA number</b> _____ <i>*Joint Permit Application is required for use of Stone</i>	<b>Source of Base Material:</b> <b>Company Name</b> _____ <b>Price est. /bu or ton</b> _____	<i>MRC Use Only</i> <i>JPA Confirmation (if applicable)</i>
<b>IMPLEMENTATION PLAN – LIVING OVERLAY</b> <i>*complete only for projects requiring spat on shell.</i>		
<b>Larvae Information:</b> <b>Hatchery name</b> _____ <b>Total number of larvae needed (M)</b> _____ <i>(estimate 3 million per 100 bushels shell which equals a total of 30 M for 1,000 bushels of shell)</i>	<b>Setting Station Information:</b> <b>Name/Location</b> _____ <b>Number of tanks</b> _____ <b>Capacity of 1 tank (bu)</b> _____ <b>Total capacity at site (bu)</b> _____ <b>Average set rate from station</b> _____	
<b>Estimated Implementation Date for Spat on Shell Planting (Month(s)/Year):</b>		

<b>ADDITIONAL SPECIFICATIONS AND CERTIFICATIONS</b>
<b>Provide any additional notes or specifications about this restoration activity</b>
<b>Certification Statement:</b> <b>I certify the implementation plan will meet the criteria for the NRCS conservation practice standard</b>  <b>Signature</b> _____ <b>Date</b> _____
<b>VMRC Comments and Approval</b>