

2016 SEASON SEED TRANSPLANT REPORT

INFORMATION REGARDING SEED PURCHASED AND PLANTED ON PRIVATE LICENSE SITES AND MUNICIPAL PROPAGATION AREAS IN 2016 ARE TO BE COMPLETED BY ALL APPLICANTS.

Species Planted	Name of Hatchery/Individual	Amount Purchased	Date Planted	License Site # and DSGA

ESTIMATED AMOUNTS OF SHELLFISH PRESENT ON LICENSE SITE AFTER HARVEST

QUAHOGS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

AM. OYSTERS: AGE 1 (UP TO 1 YR) _____ AGE 2 (1-2 YRS PLUS) _____

ALL INFORMATION FURNISHED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Municipality/Licensee's Name: _____
Town: _____ Permit #: _____

Signature: _____ Date: _____

**ALL 2016 SEED TRANSPLANT REPORTS MUST BE RECEIVED WHEN ALL SEED PLANTING IS
COMPLETED AND NO LATER THAN *December 31, 2016*.**

Please direct all inquires regarding this matter to:

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