

The survey is broken down into 7 sections

1. General Information
2. Recreational Harvesting
3. Wild Commercial Harvest
4. Commercial Shellfish Aquaculture
5. Municipal Shellfish Propagation
6. Shellfish Department Capacity
7. Other

1. General Information

A. Contact Information

i. Name of Municipality _____

ii. Individual(s) completing the survey
_____ Department _____

iii. Contact information phone _____ Email _____

B. Is there recreational shellfish harvest in your community? Yes ___ No ___ (if yes, please complete section 2).

C. Is there commercial wild shellfish harvest in your community? Yes ___ No ___ (if yes, please complete section 3).

D. Is there commercial shellfish aquaculture in your community? Yes ___ No ___ (if yes, please complete section 4).

E. Do you have a municipal shellfish propagation program? Yes ___ No ___ (if yes, please complete section 5).

F. If you answered No for sections B-E, please complete sections 1,6 and 7 only

2. Recreational Shellfish Harvest

- A. On average, what is the total number of recreational permits your community issues annually?

# Permits Issued Annually Options	0-100	100-250	250-500	500-1000	1000-1500	1500-2000	2000-2500	>2500
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Is it possible to break down the approximate number of permits issued annually by permit category (i.e. individual, family, senior, non-resident, or student)? yes no

Please complete the table below by entering the cost of the permit next to the appropriate permit type and by using the drop down menu options to select the approximate number of permits issued for the corresponding category

Permit Type options	Individual	Family	Senior	Non-Resident	Student	Veteran	Other	
# Permits Issued Annually Options	0-100	100-250	250-500	500-1000	1000-1500	1500-2000	2000-2500	>2500

If other, please explain _____

- B. Has the number of recreational permits issued annually in your community Increased _____, Decreased _____, or not changed _____ over the last decade? Can you identify any factors that may be driving trends in recreation permits? (select all the apply)

Factors options	Disease	Increased natural recruitment	Decreased natural recruitment	Increased propagation planting	Decreased propagation planting	Other
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If other, please explain _____

- C. What shellfish species are open for recreational harvest in your community (select all that apply)

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
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If other, please explain _____

D. Do you have weekly or daily harvest limits? Weekly ___ daily ___

If possible can you break the recreational harvest limits down by species? Please enter the weekly or daily limit in the box next to the appropriate species and use the drop down menu to select the units in which the limit is recorded under.

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
Units options	lbs.	pieces	Bushels	pecks	Baskets	quarts	Other	

If other, please explain _____

Is the recreational harvest of these species is limited to certain seasons or days of the week? Yes no?

If possible please select the appropriate **open** period from the drop down menu for each species

Species options	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other	
Options	Year round	Fall-Spring	Spring	Fall	Summer	Select days of the week		

E. Does your community have designated recreational shellfish areas? Yes ___ No ___. If yes, how many acres? _____.

F. Does your community track recreational landings? Yes ___ No ___. If yes, please enter the unit they are measured in next to the appropriate species and using the drop down menu select the approximate landings for the corresponding category

	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
Landings Options	0-100	100-250	250-500	500-1000	1000-2000	2000-5000	>5000	
Units options	lbs.	pieces	Bushels	pecks	Baskets	quarts	Other	

What period or year does this represent ? _____

- G. Has your community identified any specific trends in recreational shellfish landings in the last decade? please select the trend that applies for each species

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
Trend options	up	down	Stable					

- H. Has your community identified any potential factors that may be driving trends in recreational landings? Check the boxes that apply

Disease	Increased natural recruitment	Decreased natural recruitment	Less fishing effort	More fishing effort	Increased propagation planting	Decreased propagation planting	Other
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If other, please explain _____

- I. Does your community conduct propagation or contaminated relays to supplement recreational harvest? If yes do you know approximately what percent of your community's annual recreational shellfish harvest comes from naturally occurring stock, planted propagation stock, contaminated relay stock, or don't know?

Options	Naturally occurring	Planted propagation	Contaminated Relay	Don't know	
Percent options	10%, 20%, 30%, 40% 50% 60% 70% 80% 90% 100%				

- J. Are there restrictions in your community on recreational permits specific to out-of-state applicants? Yes___ No___. If yes, Please describe _____

- K. Has your community identified any factors limiting recreational harvest opportunities in your waters? Yes___ No___. Select all that apply

Options	Lack of standing stock	Limited areas open for harvest	Limited access to harvest areas	Inadequate staff to supervise recreational harvest	Other
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If other, please explain _____

L. Do you provide any educational materials to recreational permit holders related to open and closed shellfishing areas, shellfish harvesting, shellfish sanitation, etc.? If yes, what? _____ If no, would you if resources were available? Yes___ No___.

M. Has your community experienced enforcement issues associated with recreational shellfish harvesting in the last 5 years? Yes___ No___ . If yes,

Options	failure for individuals to obtain a permit	harvesting over the limit	Harvesting from a closed area	other	
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If other, please explain _____

N. Do you have dedicated staff to oversee recreational shellfish harvest? Yes___ No___ . If yes approximately how many staff hours a week are dedicated to overseeing recreational harvest activities (combine hours if more than one staff person is involved)?

Options	1-10	10-20	20-30	30-40	40-50	>50
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O. Do you have a Comprehensive Waste Water Management Plan? Yes no

P. Are recreational landings a component of your municipality's Comprehensive Waste Water Management Plan (e.g., to achieve specific water quality goals)? Yes___ No___.

Q. Do you partner with any groups to assist with recreational shellfish activities in your municipality? If yes, check all that apply___ County, ___ State, ___ Federal , ___ Academic,___ Non-profit,___ other. Please list specific groups if possible_____

3. Commercial Wild Harvest

A. On average, what is the total number of commercial permits your community issues annually?

# Permits Issued Annually Options	0-25	25-50	50-100	100-200	200-300	300-400	>400
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Is it possible to break down the approximate number of commercial permits issued annually by permit category (i.e. individual, family, senior, non-resident, or student)? yes no

Please complete the table below by entering the cost of the permit next to the appropriate permit type and by using the drop down menu options to select the approximate number of permits issued for the corresponding category

Permit Type options	Individual	Family	Senior	Non-Resident	Student	Veteran	Other	
# Permits Issued Annually Options	0-25	25-50	50-100	100-200	200-300	300-400	>400	

If other, please explain _____

B. Is there a cap on commercial permits in your community? Yes ___ No _____. If yes, what is the limit? _____. Approximately how long ago was that cap set? _____.

C. Is there a waiting list for commercial permits in your community? Yes ___ No _____. If yes, how many people are on the waiting list? _____. Approximately how long ago was the list created? _____

D. Has the number of commercial permits issued annually in your community Increased _____, Decreased _____, or not changed _____ over the last decade?

Can you identify any factors that may be driving trends in commercial permits?
(select all the apply)

Factors options	Disease	Increased natural recruitment	Decreased natural recruitment	Increased propagation planting	Decreased propagation planting	Other
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If other, please explain _____

E. What shellfish species are open for commercial harvest in your community (select all that apply)

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam	Oyster	Mussel	Other
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If other, please explain _____

F. Do you have weekly or daily harvest limits? Weekly _____ daily _____

If possible can you break commercial harvest limits down by species? Please enter the weekly or daily limit in the box next to the appropriate species and use the drop down menu to select the units in which the limit is recorded under.

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam		Oyster	Mussel	Other
Units options	lbs.	pieces	Bushels	pecks	Baskets	quarts	Other	

If other, please explain _____

Is the recreational harvest of these species is limited to certain seasons or days of the week? Yes no?

If possible please select the appropriate **open** period from the drop down menu for each species

Species options	Soft Shell	Quahog	Razor Clam		Oyster	Mussel	Other	
Options	Year round	Fall-Spring	Spring	Fall	Summer	Select days of the week		

G. What methods of shellfish harvesting occur in your municipality select all that apply

Harvest options	Mechanical dragging	Tonging	Hand rake	Hand Picking	Bull raking	saltin g	Hydraulic pumping	Other
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H. Has your community identified any specific trends in wild commercial shellfish landings in the last decade? please select the trend that applies to each species

Species options	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
Trend options	up	down	Stable					

Has your community identified any potential factors that may be driving trends in commercial landings?

Options	Disease	Increased natural recruitment	Decreased natural recruitment	Less fishing effort	More fishing effort	Increased propagation planting	Decreased propagation planting	Other
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I. Has your community identified any factors limiting commercial harvest opportunities in your waters? Yes ___ No ___. If yes, check all the boxes that apply

Options	Lack of standing stock	Limited areas open for harvest	Limited access to harvest areas	Inadequate staff to supervise harvest	Other
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J. Do you provide any educational materials or other information related to open and closed shellfishing areas, shellfish harvesting, shellfish sanitation, etc. to commercial permit holders? If yes, what? (please provide a link if an online resource _____)

K. Has your community experienced enforcement issues associated with commercial shellfish harvesting in the last 5 years? Yes ___ No ___. If yes,

Options	failure for individuals to obtain a permit	harvesting over the limit	Harvesting from a closed area	other	
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- L. Does your community conduct propagation or contaminated relays to supplement commercial harvest? If yes, do you know approximately what percent of your community's annual commercial shellfish landings comes from naturally occurring stock, planted propagation stock, contaminated relay stock, or don't know? Please complete the table below

Options	Naturally Occurring	Planted propagation	Contaminated Rely		
Percent options	10%, 20%, 30%, 40% 50 % 60% 70% 80% 90% 100%				

- M. Does your community have an approved Comprehensive Waste Water Management Plan (yes no? If Yes are commercial wild harvest landings a component of your municipality's Comprehensive Waste Water Management Plan (e.g., to achieve specific water quality goals)? Yes ___ No ___.

- N. Has your community identified any specific concerns or issues pertaining to state or federal policy, regulation, or legislation related to commercial shellfish harvesting (i.e., recent policy, regulatory, or statutory changes, changes in the NSSP) Yes ___ No ___. If yes, please describe _____

- O. Do you have dedicated staff to oversee commercial shellfish harvests? Yes ___ No ___. If yes approximately how many staff hours a week are dedicated to overseeing commercial harvest activities (combine hours if more than one staff person is involved)?

Options	1-10	10-20	20-30	30-40	40-50	>50

P.

- Q. Do you partner with any groups to assist with commercial shellfish activities in your municipality? If yes, check all that apply ___ County, ___ State, ___ Federal , ___ Academic, ___ Non-profit, ___ other. Please list specific groups if possible _____

4. Private Commercial Aquaculture

- A. What is the current number of aquaculture licenses and total acreage in your community?

Total Acres	
# of license holders	
# of licenses	

- B. Is there a cap on the number of Aquaculture licenses in your community? Yes ___ No ___. If yes, what is the cap? _____. Approximately how long ago was that cap set?

- C. Does your community have a residency requirement for aquaculture licenses? Yes ___ No ___.

- D. How many individuals do you allow to be named to one license? _____

- E. Is there a maximum number of acres license holders are limited to?

- F. Has the number of aquaculture licenses in your community Increased ____, Decreased ____, or not changed in the past decade?

- G. Have shellfish aquaculture landings in your community Increased ____, Decreased ____, or not changed in the past decade?

Has the amount of aquaculture acreage in your community Increased ____, Decreased ____, or not changed in the past decade?

- H. Is there an official moratorium on shellfish aquaculture licenses in your community? Yes ___ No ___. If yes, approximately when was it put in place?

_____.

- I. Is there a waiting list for aquaculture licenses in your community? Yes ___ No ___. If yes, how many people are on the waiting list? _____. Approximately when was the list created?

- J. Are there identified Aquaculture Development Areas in your community? Yes ___ No ___. If yes, are those areas full? Yes ___ No ___.

- K. Does your community have a substantial use requirement to maintain an aquaculture license? Yes ___ No ___. If yes, is it a minimum production or minimum investment requirement or other?

L. What is the annual fee/acre for aquaculture licenses in your community?

M. Does your community charge fees to aquaculture license holders other than the license fee (e.g. access fee, permit fees)?

Yes ___ No ___.

N. Does your community have experience or education requirements in order to be eligible for an aquaculture license? Yes ___ No ___ . ___ . If yes, check all that apply

Options	experience working on a shellfish lease	fisheries experience in general	course work	a combination	other
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O. Has your community experienced enforcement issues associated with shellfish aquaculture in the past 5 years? Yes ___ No ___ . If yes, check all that apply

Options	Theft	Failure for individuals to obtain permits	Gear washing off site	Improper or lack of markings	other
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P. Does your community have an approved Comprehensive Waste Water Management Plan? Is aquaculture a component of your municipality's Comprehensive Waste Water Management Plan? Yes ___ No ___ . e.g., to achieve specific water quality goals)?

Q. Has your community identified any specific concerns or issues pertaining to state or federal policy, regulation, or legislation related to shellfish aquaculture (i.e. recent policy, regulatory, or statutory changes, changes in the NSSP) Yes ___ No ___ . If yes, please describe _____

R. Do you have dedicated staff to oversee shellfish aquaculture? Yes ___ No ___ . If yes approximately how many staff hours a week are dedicated to overseeing aquaculture activities (combine hours if more than one staff person is involved)?

Options	1-10	10-20	20-30	30-40	40-50	>50
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5. Do you partner with any groups to assist with aquaculture activities in your municipality? If yes, check all that apply ___ County, ___ State, ___ Federal , ___ Academic, ___ Non-profit, ___ other. Please list specific groups if possible _____

SAMPLE SURVEY

5. Municipal Propagation

A. Does your community conduct shellfish propagation primarily to supplement recreational harvest ____, or commercial harvest ____, both ____ or other? If other please explain?

B. What are the primary species you propagate? Check all that apply

Species	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other

C. What is the primary method of propagation in your community (i.e. cultching, netting or other seed collection devices, purchase of hatchery reared seed for out planting, both)?

Cultching	Spat on shell	Spat collection	Purchase of hatchery reared seed	combination

D. If you purchase hatchery seed, what species and how much and what sources?

Species	Bay Scallop	Soft Shell	Quahog	Razor Clam	Surf Clam	Oyster	Mussel	Other
Quantity								
Sources								

Are you able to obtain enough seed to meet your municipality’s planting objectives? Yes___ No___. If no, how much more would you like to obtain annually?

E. Do you participate in the contaminated relay program? Yes___ No___. If yes, are you able to receive the amount of shellfish to meet your communities planting objectives? Yes___ No___. If no, how much more would you like to obtain annually? _____.

F. Do you trade or barter shellfish with other communities? Yes___ No___.

G. Do you partner with any groups to assist with shellfish propagation activities in your municipality? If yes, check all that apply ___ County, ___ State, ___ Federal , ___ Academic, ___ Non-profit, ___ other. Please list specific groups if possible _____

H. Does your community actively seek grants or other outside sources of funding to augment your propagation budget?

I. Are county and/or state propagation funds available to your municipality to augment your seed purchases? Yes ___ No ___.

J. Has your community identified any factors limiting the success of your propagation program? Yes ___ No ___. If yes, check all that apply

Inability to obtain seed	Budget shortfalls	disease	theft	Staff limitations	other
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K. Does your community have an approved Comprehensive Waste Water Management Plan yes no. Is shellfish propagation a component of your municipality's Comprehensive Waste Water Management Plan? Yes ___ No ___.

L. Has your community identified any specific concerns or issues pertaining to state or federal policy, regulation, or legislation related to shellfish propagation (i.e. recent policy, regulatory, or statutory changes, changes in the NSSP) Yes ___ No ___. If yes, please describe _____

M. Does your community use upwellers and/or nursery growout systems for municipal propagation? Yes ___ No ___.

N. Does your community have dedicated staff to assist with propagation activities? Yes ___ No ___. If yes approximately how many staff hours **a year** are dedicated to propagation activities?

O. Does your community allow other entities to conduct work under their Municipal propagation permit (e.g. non profit, school or other educational organization, homeowners) ? Yes ___ No ___. If possible please specific groups

6. Shellfish Program Capacity

- A. Does your community have a Shellfish Constable? Yes___ No___. If yes, is the position full time_____ or part time_____? Does the shellfish constable have another job related to natural resource management (e.g. Harbormaster and/or natural resource officer)? Yes ___ No___. If yes, what position?
- B. Does your community have a Deputy Shellfish Constable(s)? Yes___ No___ If yes, how many? _____ please list how many of them are full time _____ or part time_____? Are they seasonal_____ or year round_____?
- C. Has your Shellfish Constable or Deputy Constable(s) completed a MSOA Constable Training Course? Yes___ No___
- D. Does your community employ shellfish staff that are not constables? Yes___ No___? If yes how many? Please select all that apply and the number of staff

Staff Options	Biologists	Aquaculture Specialists	Propagation specialists	Other
Number of Staff options	1, 2, 3, 4, 5, 6, 7, 8, 10, >10			

- E. Does your community have a Shellfish Advisory Board or Shellfish Committee? Yes___ No___.
- F. Does your community conduct shellfish disease monitoring? Yes___ No___. If yes, for what purpose and what lab do you send them to?

Purpose Options	Background monitoring	Transplant between propagation sites	Other		
Lab Options	Kennebec River Biosciences	Roger Williams	VIMS	Rutgers	Other

If other, what?

- G. What are your community's total annual expenditures on shellfish management?

Total Budget	\$0-5,000	\$5000-10,000	\$10,000-\$25,000	\$25,000-50,000	\$50,000-100,000	\$100,000-150,000	>\$150,000
Personnel	\$0-5,000	\$5000-10,000	\$10,000-\$25,000	\$25,000-50,000	\$50,000-100,000	\$100,000-150,000	>\$150,000
Admin	\$0-5,000	\$5000-10,000	\$10,000-\$25,000	\$25,000-50,000	\$50,000-100,000	\$100,000-150,000	>\$150,000
Propagatio n	\$0-5,000	\$5000-10,000	\$10,000-\$25,000	\$25,000-50,000	\$50,000-100,000	\$100,000-150,000	>\$150,000
Equipment	\$0-5,000	\$5000-10,000	\$10,000-\$25,000	\$25,000-50,000	\$50,000-100,000	\$100,000-150,000	>\$150,000

H. What are your community's revenues from shellfish permit and license fees? Please use the drop down menu to select the appropriate range for the corresponding category)

Options	Recreational Permits	Commercial permits	Aquaculture license fees	Other shellfish specific fees			
Options	\$0-1000	\$1000-2500	\$2500-5000	\$5,000-7500	\$7,500-10,000	\$10,000-20,000	>\$20,000

I. Are revenues from permit and license fees put in a dedicated shellfish fund or the general budget? Yes no

7. Other

- A. Does your community have a current municipal shellfish management plan with DMF to manage shellfish resources in contaminated waters? Yes_____ No_____. If yes, approximately when was it last updated _____?
- B. Does your community have a local shellfish resource management plan? Yes_____ No_____. If yes, approximately when was it last updated _____?
- C. Does your community have a local aquaculture management plan? Yes_____ No_____. If yes, approximately when was it last updated _____?
- D. Does your community have a local harbor plan? If yes, approximately when was it last updated _____?
- E. Is there a stated interest in your community to expand or create opportunities for shellfish aquaculture, recreational harvest and/or commercial harvest in your community? Yes_____ No_____. If yes, check all that apply

Options for selection	Recreational	Commercial	Aquaculture
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- F. Would financial support _____, technical assistance _____, or both_____ help meet your community's interests in expanded shellfishing activities in your community?
- G. Does your municipality receive support from state funds to support shellfish management? Yes_____ No_____. If yes, what sources
- H. Does your community feel adequate state resources exist to support your community's shellfish management needs? If yes, Please explain
- I. Does your community provide any educational materials or other shellfish information to the general public? If yes, what? _____ If no, would you if resources were available? Yes___ No___.
- J. Does your community have any shellfish restoration projects in place? If yes, describe: _____. If no, are there plans/goals to start restoration projects in the future?

K. Does your community have infrastructure needs that limit opportunities for shellfishing? Yes ___ no ___. If yes, select all that apply

Options	Lack of boat ramps	Lack of parking	Lack of shellfish department boats	Dredging needs	Other
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L. How does your community communicate information on harvest area status to your harvesters

Phone calls	Text messages	website	Signs	Social media	Other
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If you use a web resource please include a link.

H. How many acres of shellfish areas Does your community patrol (please use the drop down menu to select the number of acres for each classification)?

Approved	Conditionally Approved	Restricted	Conditionally Restricted	Prohibited	
<10	10-100	100-1000	1000-5000	5000-10,000	>10,000