

Application for New Jersey Aquatic Organism Importation

Name:					
Mailing Address:					
Date Filed (D/M/Y):		E-mail:			
City:		State:		Zip code:	
Telephone #	()	Fax #	()		
Aquatic Farmer License #:		GPS:			

Directions for completing this form:

This form can be used whether you import one species from one supplier, or multiple species from multiple suppliers. The information on these two pages is used to complete the accompanying **New Jersey Aquatic Organism Importation Chart**. Each species that you plan to import for the upcoming year is to be listed on a separate row on the Chart. The information for each row is to be completed using the information below. All of the suppliers that you use can be written in Section C. Since most orders will be based on numbers, only complete Section J if applicable.

This form only needs to be filed once per year; however, if any information in Columns A-D changes, please submit the new information to the NJDA.

If you have any questions, please contact:

NJDA Office of Aquaculture Coordination – 609-984-2502 – amanda.wenczel@ag.state.nj.us

NJDA Division of Animal Health – 609-406-6999 – amar.patil@ag.state.nj.us

- A. Please provide the Common Name of the species to be imported
- B. Please provide the Latin Name of the species to be imported
- C. Below, please list each Supplier (include city and phone), and State or Country (if outside the U.S). Indicate the supplier for each species by writing the letter below into the above chart.
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____
- D. Please indicate the genetic history of the imported organism?
 - N- Natural H- Hybridized P- Polyploid
 - T- Transgenic O-Other (list)_____
- E. Please indicate the size or life-stage of the imported organism(s)?
 - Finfish* E-Egg FL-Fry/Larvae F-Fingerlings M-Market Size
 - Shellfish* EL-Eyed Larvae for Remote Set SS-Shellfish Seed
 - Other* E-Egg PL-Post-Larvae J-Juvenile AP-Aquatic Plant

- F. Please indicate which country or state are the species native to? If you are unsure, please contact the NJDA Office of Aquaculture Coordination for assistance.
- G. Please indicate the immediate destination of the imported organism (Business Name, Address, Name of Water Body, Lease Numbers)?
- H. Please indicate the type of system into which the aquatic organisms will be placed:
 O- Open fresh or marine waters F- Flow-through system
 R- Recirculating system P- Pond/lake with no outlet to natural or public waters
- I. Please provide an **approximate** number of organisms to be imported this year.
- J. Please provide an **approximate** weight (pounds) per organism to be imported this year (if applicable).
- K. Please provide the **anticipated frequency** of such importations (number of times per year)?

Refer back to Section C. For each supplier, please provide the natural resource management agency (i.e. DEP, DNR, EPA) with jurisdiction over aquatic resource management. Your supplier can provide you with this information.

Letter of corresponding supplier(s) in Section C:			
Agency name:			
City:		State:	
Telephone #	()		

Letter of corresponding supplier(s) in Section C:			
Agency name:			
City:		State:	
Telephone #	()		

Letter of corresponding supplier(s) in Section C:			
Agency name:			
City:		State:	
Telephone #	()		

Letter of corresponding supplier(s) in Section C:			
Agency name:			
City:		State:	
Telephone #	()		

New Jersey Aquatic Organism Importation Chart

	A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.
	Species (Common Name)	Species (Latin Name)	Supplier Info.	Genetic History	Size or life-stage	Native State or Country	Destination (Business Name, Address or Water Body)	Type of Culture System	Approx. number	Approx. weight, if applicable (pounds)	Anticipated frequency (# times/yr)
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
Name:			AFL#:								