



# TOWN of EASTHAM

Department of Natural Resources  
Department of Public Works  
555 Old Orchard Road, Eastham, MA 02642  
774-801-0518



## Town of Eastham

### Initial Application for Aquaculture Grants

#### APPLICANT

Name: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

New applicants must be a bona-fide resident of Eastham or Orleans, with their primary residence being in either town for no less than twelve consecutive months prior to the date of application.

LOCATION	
<input type="checkbox"/>	BOAT MEADOW
<input type="checkbox"/>	NAUSET MARSH/TOWN COVE

#### Please read the following carefully:

The fee for submitting the Initial Aquaculture Waitlist Application is **Twenty-Five Dollars (\$25) per waitlist**. After submitting the initial application, it is **Fifteen Dollars (\$15) per year per waitlist**. In order to maintain your current position(s) on the waitlist(s), you must fill out and return with a check or money order made payable to the **Town of Eastham** to the **Eastham Natural Resources Department, 555 Old Orchard Road, Eastham, MA 02642**. Initial application and payment may be submitted at any point during the year. Annual renewal applications and payment must be **returned by March 31, annually, or your name will be removed from the waitlist(s)**.

**Please refer to the Aquaculture Waitlist Procedure for Proof of Residency Information required for this application.**

#### WAIVER OF RESPONSIBILITY

In consideration of this application being accepted, I certify that the above information is correct to the best of my knowledge and belief. I understand that the waiting list for an Aquaculture Grant includes a fee, and the Shellfish Constable will make a reasonable effort to contact me at the above address. Position status on the waiting list is not transferable and shall be restricted to the individual whose signature appears below.

Any changes to the information listed above will be forwarded by me to the office of the Shellfish Constable.

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE OF APPLICANT

DATE