



NICOLE "NIKKI" FRIED
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Aquaculture

**APPLICATION TO RENEW AN AQUACULTURE LEASE
SHELLFISH**

Section 253.69, Florida Statutes - Rule 18-21.021, F.A.C.

Leaseholder(s): _____

Lease Number: _____

Aquaculture Certificate of Registration Number(s): _____

Current Contact Information

Mailing address: _____

Phone: _____

Email: _____

In order to initiate action toward the renewal of this lease, please complete the items in the appropriate sections below, and return the completed form by the date indicated in the cover letter. Please review the items very carefully in order to avoid a delay in renewing your lease. **NOTICE: Providing false statement(s) is just cause for staff recommendation of denial of any lease renewal. If you fail to return any required application materials, this lease will expire at the end of its stated term, and the Lessee will be required to remove all shellfish and associated equipment from the state-owned lands described in the lease within 60 days from the date of expiration of the lease.**

Please renew this lease for a period of 10 years.

I do not want to renew this lease. Please sign and date this form (see Page 3) and return it to the Division of Aquaculture. **If you check this box this lease will expire at the end of its stated term, and the Lessee will be required to remove all shellfish and associated equipment from the state-owned lands described in the lease within 60 days from the date of expiration of the lease.**

Marking/Staking of Lease Corners

All corners of the lease area must be properly marked and staked prior to the renewal of this lease. Corner markers and parcel posts are required to be installed on all lease corners pursuant to the lease terms and conditions. If you check "No" in this section, this lease will not be renewed until compliance with lease marking/staking requirements has been met and proper documentation has been received by the division. This must be completed prior to the lease expiration date.

Yes No The lease area is properly marked pursuant to the lease agreement.

Corporate Information:

If lease is in the name of a corporation, please check this box and attach a copy of the charter from the state where it is registered, showing the name(s) and title(s) of officers, and the current status of the corporation.

I, _____, hereby acknowledge by execution of this document that all information in it is true, and that if any information contained herein is false, the consent to use the state-owned submerged lands may be revoked, and any shellfish, equipment and structures on such land may be forfeited to the State and removed at Lessee's expense. I also acknowledge that I am authorized to execute this application, and to perform aquaculture activities as authorized by subject lease terms and conditions.

Date: _____

Original Signature of Lessee or
Corporate Officer of Lessee

Typed/Printed Name of Lessee or
Name and Title of Corporate Officer of Lessee

If the rights and interest in this lease are co-owned, Joint Lessee acknowledges by signing below.

Date: _____

Original Signature of Joint Lessee

Typed/Printed Name of Joint Lessee

**Return completed form to:
Florida Division of Aquaculture
Holland Building, Suite 217
600 South Calhoun Street
Tallahassee, Florida 32399-1300**