



**AQUACULTURE - LICENSING UNDER**  
**FISHERIES (AMENDMENT) ACT 1997 as amended**  
**and**

**FORESHORE ACT 1933 as amended**

*Application Form for an Aquaculture and Foreshore Licence for  
a single specific site.*

*If a Licence is required for more than one site a separate  
application form must be completed for each site.*

**Important Note**

Section 4 of the Fisheries and Foreshore (Amendment) Act, 1998 (No. 54 of 1998) prohibits any person making an application for an Aquaculture Licence from commencing aquaculture operations until duly licensed under the Fisheries (Amendment) Act, 1997 (No. 23 of 1997), and provides that a breach of that prohibition will cause the application to fail.

A copy of an Environmental Impact Statement and Natura Impact Statement should be enclosed, if required, with all new, review and renewal applications. See Guidance Notes Section 3.

Aquaculture & Foreshore Management Division  
Department of Agriculture, Food and the Marine  
National Seafood Centre  
Clonakilty, Co. Cork  
P85 TX47  
Telephone: (023) 8859500  
Fax: (023) 8821782

Revised May 2018

**AQUACULTURE AND FORESHORE LICENCE APPLICATION FORM, for purposes of  
FISHERIES (AMENDMENT) ACT, 1997 and FORESHORE ACT, 1933**

***NB: The accompanying Guidance Notes should be read before completing this form.***

***Note:*** Details provided in Parts 1 and 2 will be made available for public inspection. Details provided in Parts 3 and 4 and any other information supplied will not be released except as may be required by law, including the Freedom of Information Act 1997 as amended.

**USE BLOCK CAPITALS IN BLACK INK  
PLEASE**

**For Office Use**

Application Ref. No. \_\_\_\_\_

Date of Receipt (Dept. Stamp):

**Type of Applicant (tick one)**

Sole Trader

☒

Partnership

☐

Company

☐

Co-Operative

☐

Other

Please specify-

☐

**PART 1: PRELIMINARY DETAILS**

**Applicant's Name(s)**

1. Conor O Malley

Address: Cleggan

Co Galway.

2.

Address:

3.

Address:

4.

Address:

Contact in case of enquiries (if different from above)	
Contact Name	
Organisation Name (if applicable)	
Address	

### PART 1: PRELIMINARY DETAILS

**TYPE OF APPLICATION** – please indicate relevant type of application  
This Application Form is valid for each type of application - *See Guidance Note 3.1*

- |  |                                     |
|--|-------------------------------------|
| (i) Aquaculture Licence                  | <input checked="" type="checkbox"/> |
| (ii) Trial Licence                       | <input type="checkbox"/>            |
| (iii) Foreshore Licence, if Marine Based | <input type="checkbox"/>            |
| (iv) Review of Aquaculture Licence       | <input type="checkbox"/>            |
| (v) Renewal of Aquaculture Licence       | <input type="checkbox"/>            |

### TYPE OF AQUACULTURE

*See Guidance Note 3.2*

Indicate the relevant type of application with a tick.

#### (i) MARINE-BASED

- |  |                                     |                          |
|--|-------------------------------------|--------------------------|
| Finfish                                  | <input type="checkbox"/>            | Go to Parts 2.1 and 2.1A |
| Shellfish <i>Subtidal</i>                | <input checked="" type="checkbox"/> | Go to Parts 2.2 and 2.2A |
| <i>Intertidal</i>                        | <input type="checkbox"/>            | Go to Parts 2.2 and 2.2A |
| Seaweed/Aquatic Plants/Aquatic Fish Food | <input type="checkbox"/>            | Go to Parts 2.3 and 2.3A |

#### (ii) LAND-BASED

- |                |                          |                   |                          |                          |
|----------------|--------------------------|-------------------|--------------------------|--------------------------|
| Finfish        | <input type="checkbox"/> | Shellfish         | <input type="checkbox"/> | Go to Parts 2.4 and 2.4A |
| Aquatic Plants | <input type="checkbox"/> | Aquatic Fish Food | <input type="checkbox"/> | Go to Parts 2.4 and 2.4A |

#### (iii) TRIAL LICENCE

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Go to appropriate Parts as above and to Part 2.5. |
|--------------------------|---|

## 2.2 MARINE-BASED SHELLFISH AQUACULTURE

When filling out this section refer also to 2.2A and Guidance Note 3.3 for information on Conditions and Documents required with this application type

### Proposed Site Location

- (i) Bay: Cleggan
- (ii) County: Galway gy009 / gy022.
- (iii) OS Map No: Discovery Series No 9 No 22.
- (iv) Co-ordinates of Site: (please specify coordinate reference system used e.g. Irish Grid (IG) or Irish Transverse Mercator (ITM) or Latitude/Longitude [in which case specify whether ETRS89 or WG84 etc.]  
Please see attached Map.
- (v) Size of Site (hectares): 6.58 Ha.

(vi) Species (common and scientific name) and whether native or non-native species: (see Guidance Notes 3.3.1)

Blue Mussel Mytilus edulis.

(vii) Whether production will be sub-tidal or inter-tidal?

Sub Tidal

(viii) Please supply details of (a) source of seed e.g. wild hatchery and location and (b) means of collection and introduction to culture.

Seed collection on suspended  
Collection Rope.

NB Importation of seed into the State or movement of seed within the State requires notification to the Marine Institute as per the Fish Health Authorisation Regulations – See Guidance Notes Section 6

(ix) Method of culture (rope, trestles – intensive; bottom – extensive; other)

Ropes & Barges

(x) Proposed number of lines/ropes/trestles as per site layout drawing

(xi) Proposed Production Tonnage:

Year 1	0	Year 2	30	Year 3	90	Year 4	90	Year 5	90
--------	---	--------	----	--------	----	--------	----	--------	----

(xii) (a) Please outline the reasons for site selection:

Sheltered, Good exchange of water, Home pair  
easy access Good growth.

(b) If using trestles please outline the physical characteristics of the site which make it suitable for using trestles

N/A.

(xiii) Is it intended that the product is for direct human consumption or half grown? Please specify

fully grown.

(xiv) How will the visual impact issues of the flotation devices for the proposed application be addressed?

Use of low visual impact grey barrels

(xv) Is the site located in Designated Shellfish Waters Area? (Refer to Guidance Note 3.3.2)

Yes ☐ No ☒

If yes give details.

If no outline the reasons why you believe the site suitable for the proposed aquaculture, notwithstanding its location outside Designated Shellfish Waters Area?

Due to the fact it is a ~~designated~~ Shellfish Designation.  
There is an A Designation in the next Bay.

(xvi) Has the area been classified under Food Safety Legislation? (For Bivalve Molluscs) What is the current classification of the area for the proposed species applied for?

N/A.

(xvii) Is the site located in/adjacent to a sensitive area e.g. SPA (Special Protection Area) or SAC (Special Area of Conservation) i.e. a Natura 2000 site? (Refer to Guidance Note 3.3.1- Natura 2000 sites)

No

(xviii) Are there known sources of pollution in the vicinity e.g. sewage outfall?  
If yes please give full details.

Yes/No

No

(xix) Methods used to harvest the shellfish and details of any subsequent processing of shellfish

By Boat.

(xx) Describe any proposed purification facilities to be used:

N/A.

**2.6 Employment, Qualifications, Experience, etc  
TO BE FILLED IN BY ALL AQUACULTURE APPLICANTS**

(i) Please provide details of experience/qualifications of the applicant and any key personnel which are relevant to the aquaculture now proposed:

8 years working on my Father's Mussel & oyster farm. Extensive time spent at sea both Coastal & Deep Sea.

BIM Safety Course, Efficient Deckhand ticket, advanced Fire fighting course.

(ii) If a new application please provide details of projected employment creation during first four years of the proposed aquaculture project:

(iii) In the case of a renewal please provide current and future details:

**FULLTIME JOBS**

Year 1:	1	Year 2:	2	Year 3:	2	Year 4:	2
---------	---	---------	---	---------	---	---------	---

**PART TIME JOBS**

Year 1:	2	Year 2:	1	Year 3:	1	Year 4:	1
---------	---	---------	---	---------	---	---------	---

CONFIDENTIAL

PART 3: APPLICANT DETAILS

PART 3 A. INDIVIDUAL(S)/SOLE TRADER(S)

(If necessary continue with extra page(s))

1. Name: Conor O'Malley

Personal Public Service No. [REDACTED]

Date of Birth: [REDACTED]

Telephone No. 05

Mobile No. [REDACTED]

E-mail Address

2. Name:

Personal Public Service No.

Date of Birth:

Telephone No.

Mobile No.

E-mail Address

3. Name:

Personal Public Service No.

Date of Birth:

Telephone No.

Mobile No.

E-mail Address

4. Name:

Personal Public Service No.

Date of Birth:

Telephone No.

Mobile No.

E-mail Address

**PART 3E DETAILS FOR CONTACT IF DIFFERENT FROM APPLICANT(S)****Contact in case of enquiries**

Contact Name

Organisation Name (if applicable)

Address

Telephone No.

Mobile No.

E-mail Address

**CONFIDENTIAL****PART 4: FINANCE AND MARKETING****PART 4 A. FINANCE**

1.(a) If new application give cost of project (total capital and current costs as at 7 and 8 below):

€

(b) If renew

2. How will the

an

3. Will this project be your only source of employment / income?

YES

☒

NO

☐

4. If not, give details:

5. Do you intend to apply for grant aid or other funding from any State source (BIM, Udarás na Gaeltachta, FORFÁS, etc.)?

YES

☒



NO

☐

6. If yes, give details:



**7. Proposed capital costs of project, including navigation marks and lighting.**

Item	Cost €
Rope.	
Anchors.	
Chain.	
Boat Hire.	
Buoys	
Navigation Marks.	
Total:	

**PART 4 A. FINANCE (continued)**

**8. Proposed non-capital costs of project (i.e. seed, feed, labour, etc.):**

Item	Cost €
wages.	[REDACTED]
Fuel etc	[REDACTED]
Insurance.	[REDACTED]
Bank interest & charges.	[REDACTED]
accountancy	[REDACTED]
Total:	[REDACTED]

9. Provide an estimate of the value of production over the first (next if renewal) four years based on projected annual production:

Year

10. H  
expe

11. C

12. **prod**

*ch* [REDACTED]

13. If this application relates to an existing site, please set out below the production by quantities on an annual basis for the last 4 years showing stock inputs, growth, survival rates and harvest production

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**PART 4 B. MARKETING**

1. Have possible markets been considered, or has market advice for products been sought?

YES ☒ NO ☐

2. If yes, give details:

\_\_\_\_\_

*v* [REDACTED]

*A* [REDACTED]

3. Will the product be processed or packaged?

YES ☐ NO ☒

4. If yes, give details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PART 5: DECLARATION AND SIGNING

**NB: Refer to Guidance Note Section 3.5 and Section 4 - Guidance on Declaration and Signing and Annual Aquaculture and Foreshore Licence Fees**

If this is a renewal/review have you met all licence conditions of the existing aquaculture licence? If applicable, explain why you have not complied with all conditions:

I/We hereby declare the information provided in Parts 1, 2, 3 and 4 above to be true to the best of my/our knowledge and that I am over 18 years of age. I/We enclose an application fee\* of € 95-23 with this application.

Signature(s) of Applicant(s):  
(Please state capacity of persons  
signing on behalf of a Company/Co-op)

Conor O'Malley

Date: 12-11-2020.

**NB All persons named on this licence application must sign and date this application form.  
Only the existing licence holder(s) can apply for the renewal/review of an Aquaculture Licence.**

\*Preferred method of payment is by cheque or bank draft. The fee should be made payable to the Department of Agriculture, Food and the Marine.

**Refer to Guidance Note Section 4 - Guidance on Aquaculture and Foreshore Licence Fees**

The application form should be forwarded, with the required documents and application fee, to:

**Aquaculture Licensing  
Aquaculture & Foreshore Management Division  
Department of Agriculture, Food and the Marine  
National Seafood Centre  
Clonakilty  
Co. Cork  
P85 TX47**

## **1 NO. SITE AT CLEGGAN BAY CO.GALWAY**

### **Co-ordinates & Area**

#### **Site T09/524A (6.58 Ha)**

The area seaward of the high water mark and enclosed by a line drawn from Irish National Grid Reference point

059915, 259515 to Irish National Grid Reference point  
060355, 259130 to Irish National Grid Reference point  
060290, 259050 to Irish National Grid Reference point  
059830, 259430 to the first mentioned point.

60000

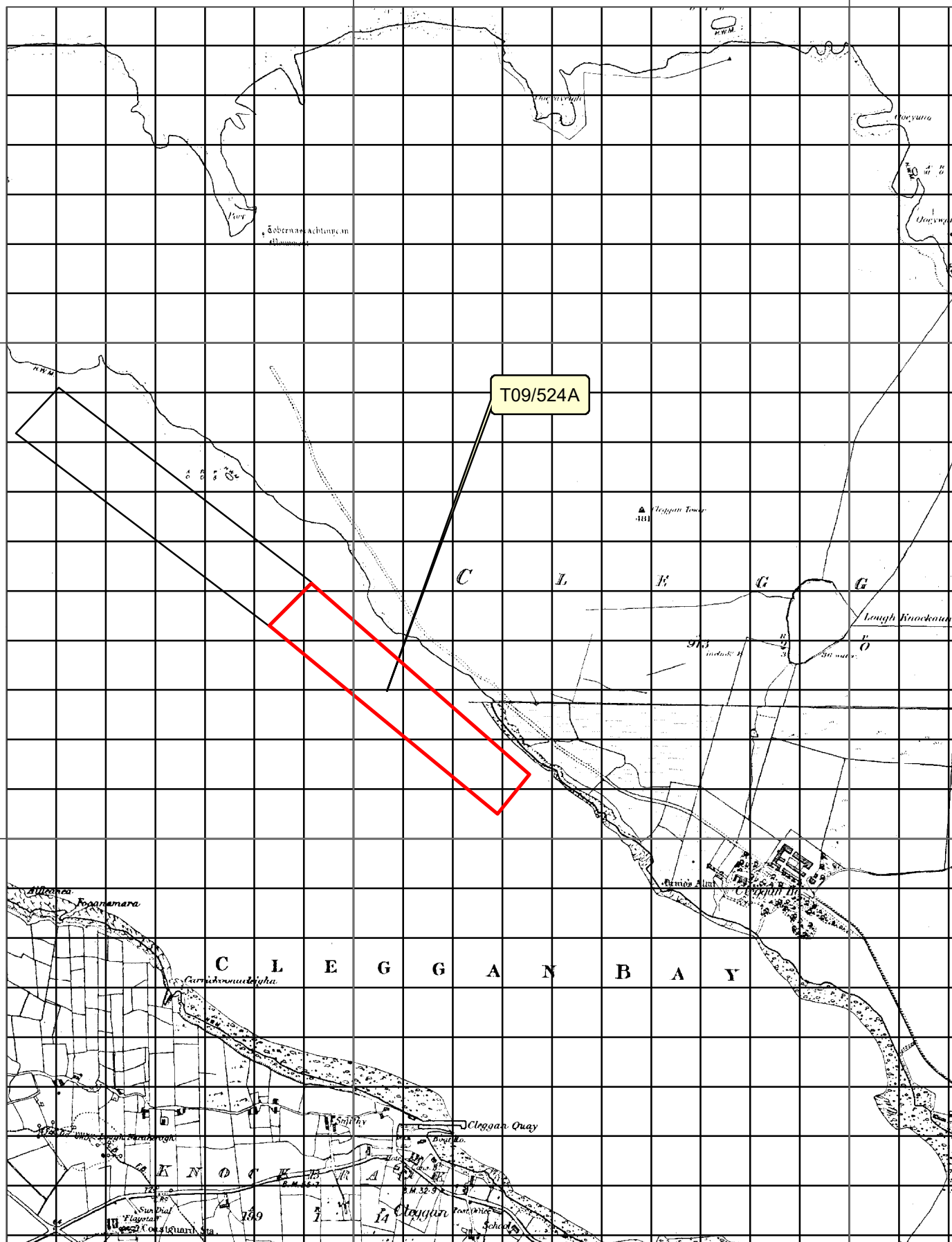
61000

260000

260000

259000

259000



60000

61000

## Legend

## Site\_Status

	Application
	Licensed
	100mgrid

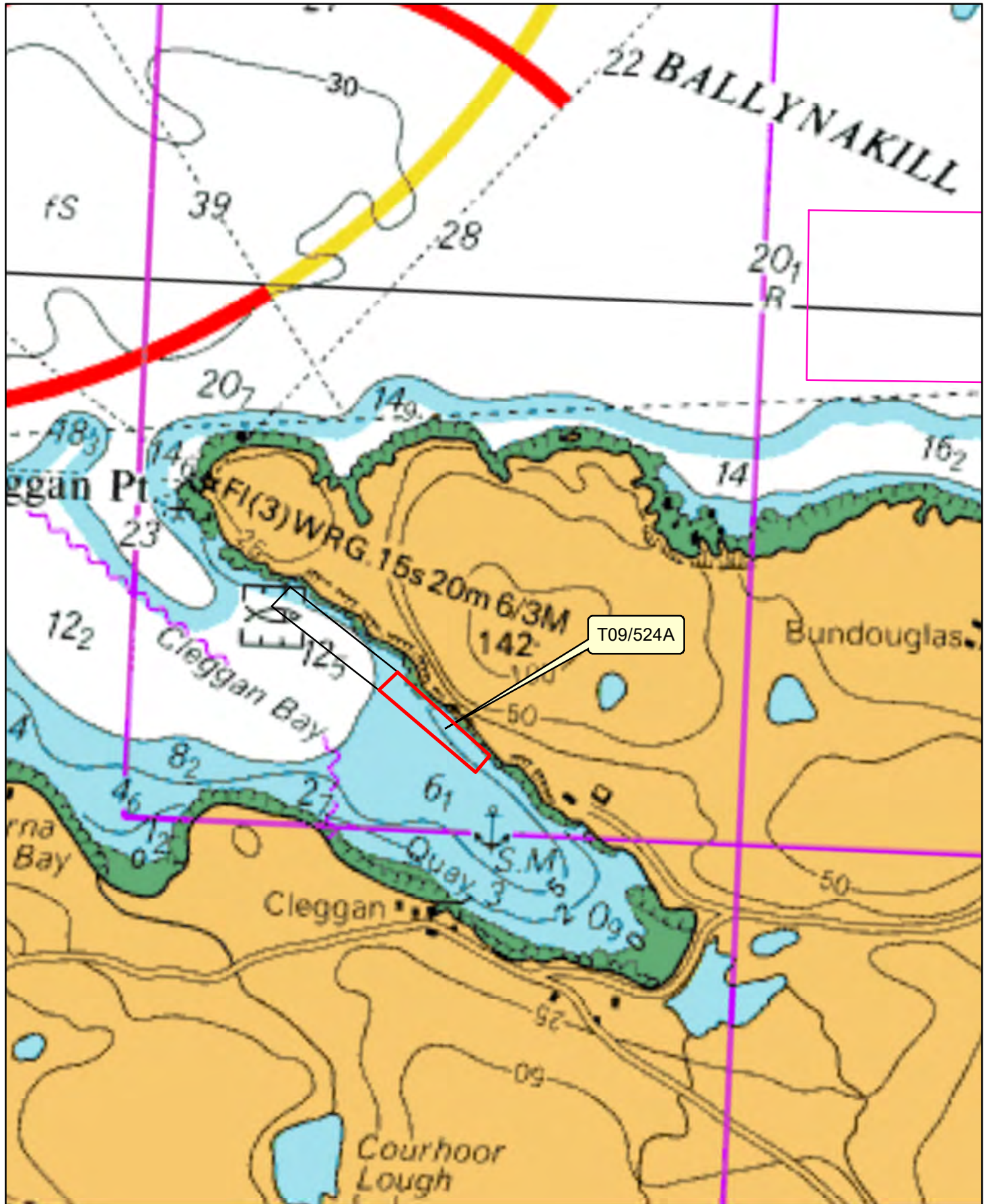
Sites highlighted in red denotes Application

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1:10,560



An Roinn Talmhaíochta,  
Bia agus Mara  
Department of Agriculture,  
Food and the Marine



1:24,000

Sites highlighted in red denotes Application

Part of Admiralty Chart No =1820-0  
Not to be used for Navigation

Legend

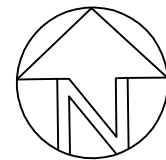
Site\_Status

Application  
 Licensed



An Roinn Talmhaíochta,  
Bia agus Mara  
Department of Agriculture,  
Food and the Marine



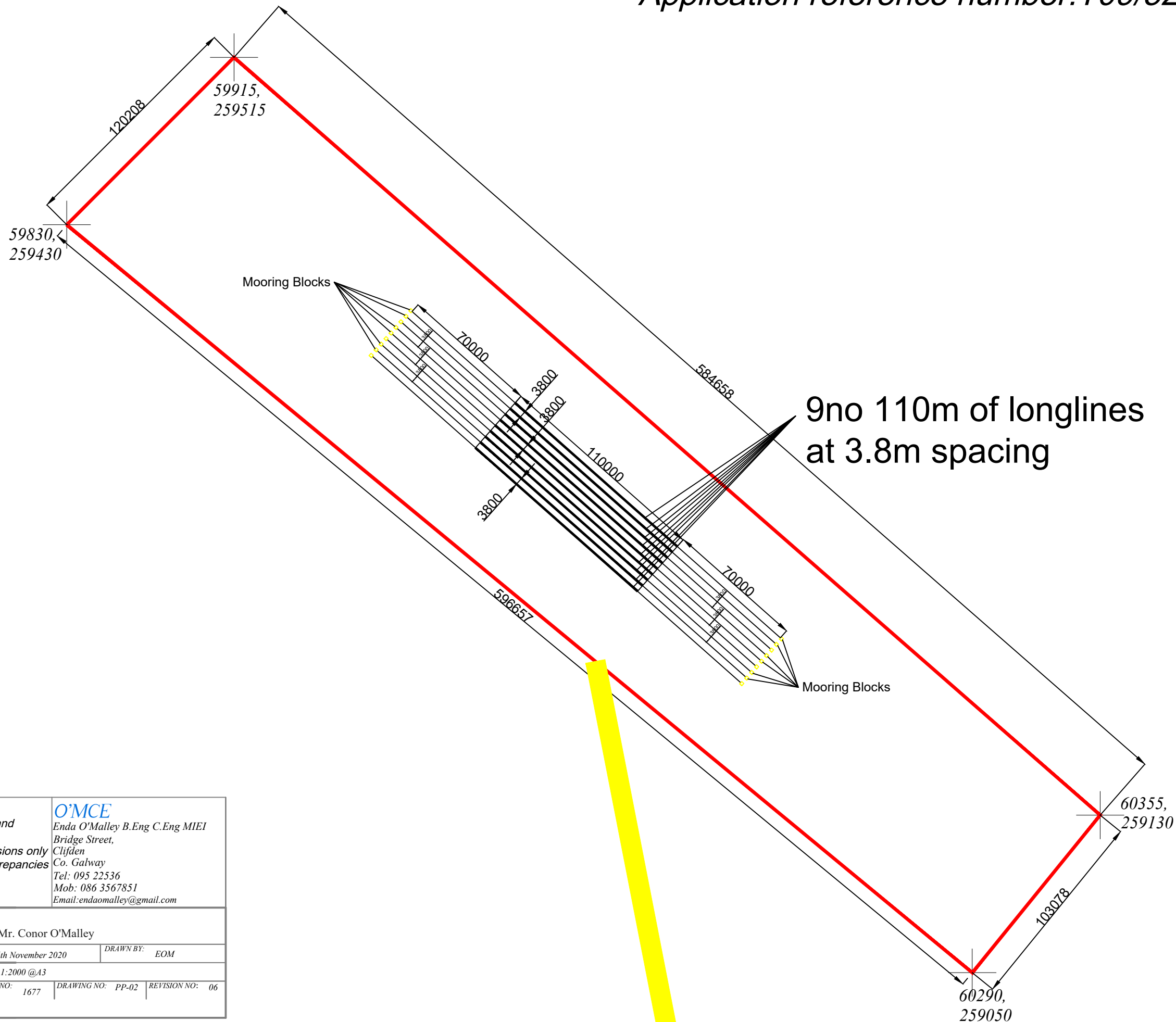


# SITE LAYOUT.

SCALE 1:1000

## LEGEND

- Proposed Boat Access
- Site Boundary
- N/A
- N/A
- Existing Rock
- Existing Levels (mAOD)
- Proposed Levels (mAOD)
- RED AREA OF SITE: 6.580 Hectares.

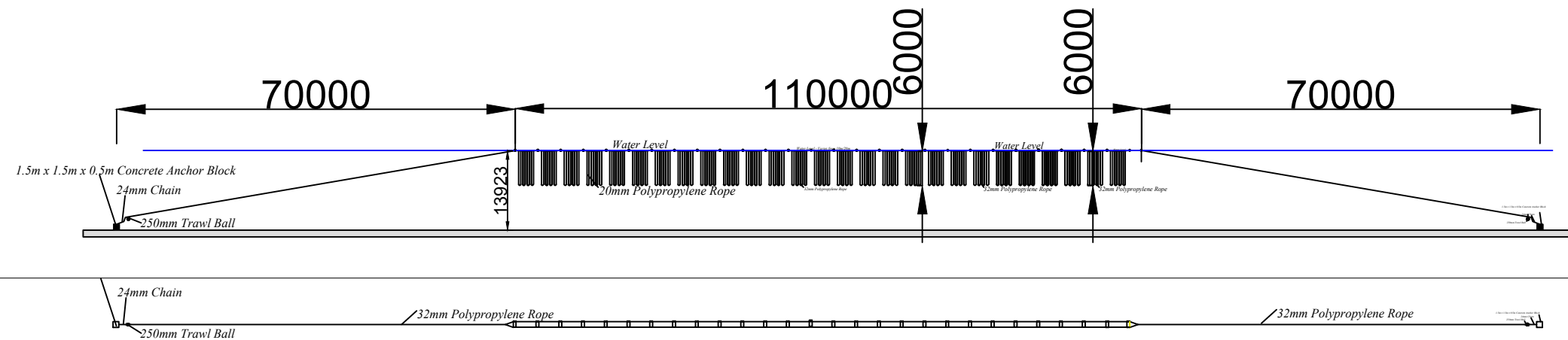


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All dimensions to be checked on site and any discrepancies reported immediately before work proceeds.  
All Dimensions in mm unless stated.

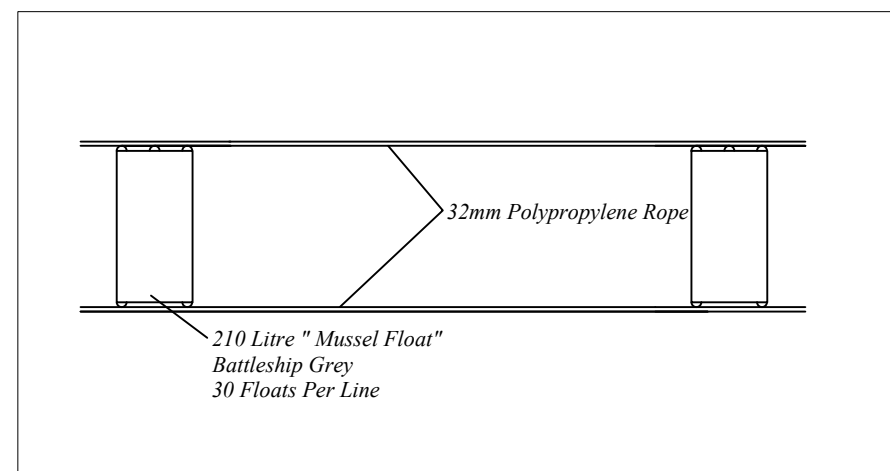
**O'MCE**

Enda O'Malley B.Eng C.Eng MIEI  
Bridge Street,  
Clifden  
Co. Galway  
Tel: 095 22536  
Mob: 086 3567851  
Email: endaomalley@gmail.com

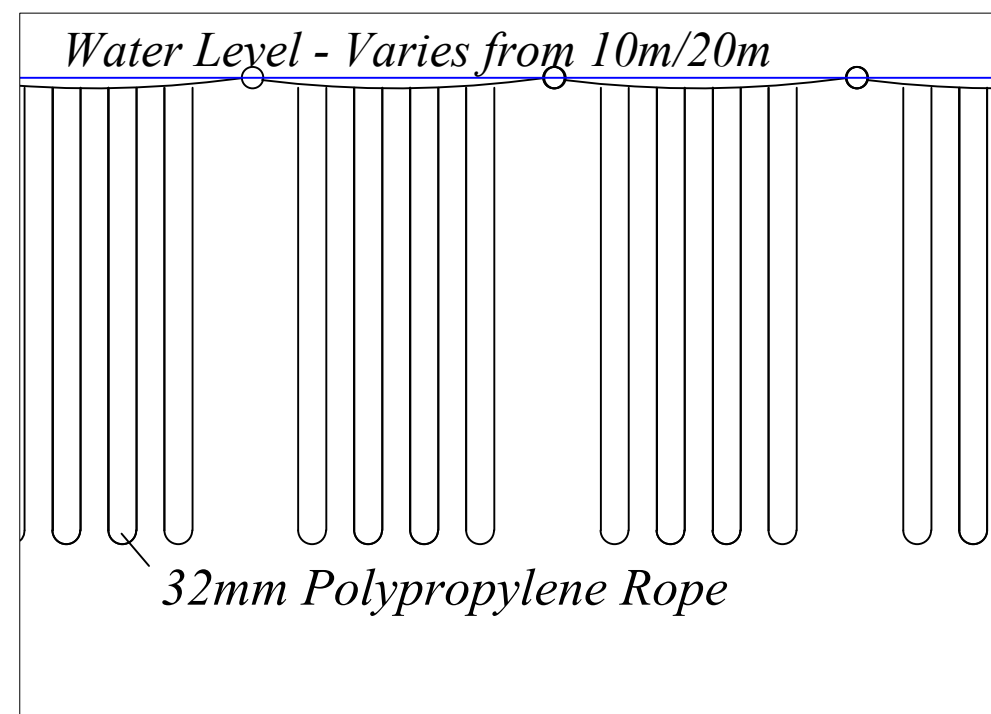
PROJECT TITLE:	CLIENT:		
Aquiculture and Foreshore Licence Maps at Cleggan, Co. Galway	Mr. Conor O'Malley		
DRAWING TITLE:	DATE: 6th November 2020	DRAWN BY: EOM	
Farm Layout	SCALE: 1:2000 @A3		
	PROJECT NO: 1677	DRAWING NO: PP-02	REVISION NO: 06



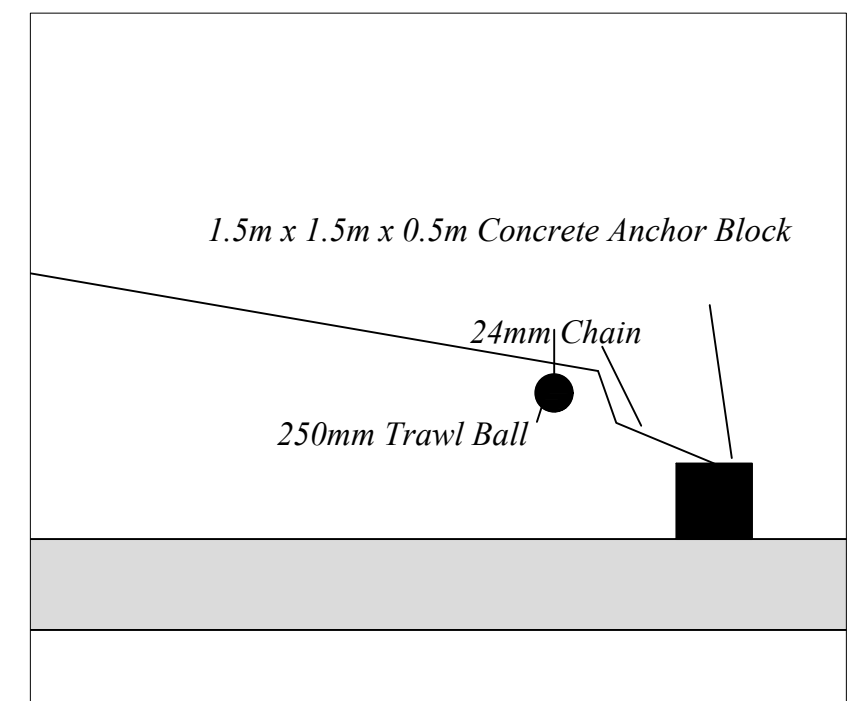
*Typical Longline Section & Plan Detail (Scale 1:1000)*



*Typical Float & Rope Plan Detail (Scale 1:50)*



*Typical Float & Rope Section Detail (Scale 1:100)*



*Typical Anchorage Section Detail (Scale 1:100)*

**Notes:**

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All Dimensions in mm unless stated.

**O'MCE**

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**Revisions**

Date	Description

**PROJECT TITLE:**

Aquiculture and Foreshore Licence Maps  
at Cleggan Bay, Co. Galway

**DRAWING TITLE:**

Mussel Longlines

**CLIENT:**

Mr. Conor O'Malley

DATE: 17th November 2020

DRAWN BY: EOM

SCALE: Ash Shown @A3

PROJECT NO: 1677

DRAWING NO: PP-02

REVISION NO: 06