

HATCHERY APPLICATION (Rev. Sept 2024)



rssbp.org

Send completed applications as an attachment to info@rssbp.org
 Contact info@rssbp.org with any questions on the application or Program.

DATE OF APPLICATION		
CONTACT INFORMATION		
Facility Name		
Facility Physical Address		
Point of Contact		
Phone number	email	
FACILITY INFORMATION		
Number of years in operation		
Facility diagram: please attach a diagram showing the general facility layout (does not have to be to scale), including room(s)/area(s) labels (algae, larvae, broodstock, water treatment, etc) and the flow of treated and untreated water.		
RSSBP PARTICIPATION		
select one:		
<p><input type="checkbox"/> FACILITY BMP-COMPLIANCE <i>Annual Facility Audit Required. Appropriate for facilities who are building three-year health history on products for transfer or facilities whose business model doesn't necessitate product compliance. Hatchery Products section must be completed, regardless.</i></p>		
<p><input type="checkbox"/> FACILITY BMP-COMPLIANCE AND BIOSECURE PRODUCT <i>Annual Facility Audit <u>and</u> Specific Product Audit Required. Appropriate for facilities who have the required three-year health history on a specific species and size product(s).</i></p>		
FACILITY SOURCE WATER (list specific body of water)		
Hatchery Source Water		
Nursery Source Water (if applicable)		

DESCRIPTION OF PROCEDURES COMPLIANT WITH PROGRAM BEST MANAGEMENT

PRACTICES; *Please provide a description under each BMP of facility compliance and attach copies of standard operating procedures that minimize disease risk at the facility, as available.*

1. Water treatment to prevent pathogen exposure during early life stage cultivation should employ a series of filters to get to 1µm filtration, or demonstrate another means to minimize the risk of pathogen exposure from source water (e.g., pasteurization, well water, etc.).

Briefly describe pre and post treatment of water for the following systems: broodstock, algae, larvae, post-set.

2. Adequate separation is required between untreated water and treated water to avoid cross contamination including physical separation of areas, water drainage, equipment, workflow, and cleaning:

2-a. Physical separation of areas- Adult animals, i.e., broodstock, should be segregated from algal, larval, and post-set culture systems within the hatchery. If applicable, quarantine practices must be demonstrated for all non-local endemic species of broodstock.

2-b. Water drainage - Contain/divert untreated water drainage in some manner (floor drains, etc.) to avoid spilling out on the floor where it could easily come in contact with clean equipment (hoses, buckets) or be tracked throughout the facility.

2-c. Equipment - Equipment should be assigned to specific operational areas (e.g., containers used to transport adult animals should be used only for such tasks) or effectively sanitized between uses when shared.

2-d. Workflow - Workflow and operational plans should be designed to prevent the introduction of raw water and contaminants from entering areas where cultivated life stages are in treated water. *List employee training, signage, or other related information.*

2-e. Cleaning – Cleaning of water filters or other water treatment apparatus should be conducted in an area separate from treatment areas or any areas containing treated water to avoid cross contamination.

3. Records should be kept for broodstock, spawning, and maintenance of systems used to eliminate Pathogens of Concern (POCs):

3-a. Broodstock records must be maintained and document source location (source water), genetic background, and collection date. If applicable, quarantine practices must be documented for all non-local endemic species of broodstock. *Include whether or not your facility has quarantine procedures in place and include copy of the protocol.*

3 - b. Spawning records must be maintained that document the specific broodstock used from the broodstock records, spawn code/name, and date spawned in order to accommodate any trace back from health certification results.

3-c. Records should be kept indicating maintenance of systems to eliminate POCs from source water (e.g., filter change regimes, relative “age” of all active filters). Labels on equipment indicating maintenance are strongly recommended to alert all staff of needs.

4. Health examinations should be conducted on animals experiencing unexplained, atypical mortality and records kept. This maintains the Program’s ability to stay alert to possible emerging pathogens as well as POCs. *Briefly describe your relationship with the shellfish pathology community and approach to evaluating unexplained mortality.*

5. All Federal, State and Local permitting requirements, such as obtaining hatchery facility permits must be followed. *List permit (s) required for your facility location (if applicable). By signing and submitting the application, you are acknowledging your responsibility for regulatory compliance.*

FACILITY BMP CERTIFICATION STATEMENT

I certify the biosecurity procedures and practices described are true and complete.

Signature _____ **Date** _____

HATCHERY PRODUCTS (this section must be completed regardless if you are applying for product certification)

ALL SPECIES PRODUCED AND LIFESTAGES MARKETED Please list all species that are produced in your facility whether you are interested in covering them under this program or not. For each species listed, include the lifestage(s)/size(s) marketed

Genus Species _____ lifestage/size marketed _____

Genus Species _____ lifestage/size marketed _____

Genus Species _____ lifestage/size marketed _____

Genus Species _____ lifestage/size marketed _____

Genus Species _____ lifestage/size marketed _____

HEALTH HISTORY STATUS select one:

_____ In the process of building health history _____ 3-year health history is in place

Comments (include current frequency of health evaluations of products in the facility):

PRODUCTS FOR BIOSECURITY CERTIFICATION Please list products for coverage under the RSSBP either currently or in the future. Health evaluations will be audited to verify compliance.

Genus Species _____ size _____

Genus Species _____ size _____

Genus Species _____ size _____

PATHOLOGIST List the name(s) of the Pathologist / Businesses used for health evaluations

PRODUCT BIOSECURITY CERTIFICATION STATEMENT AND RELEASE

I hereby give permission for the RSSBP administrators to access all shellfish health history records for this facility.

Signature _____ Date _____

