

Gear Loss Reimbursement Form

Filing a Claim

Atlantic Shores Offshore Wind, LLC ("Atlantic Shores") and our contractors will make every attempt to avoid damaging fishing gear in our lease area during surveys, construction, and operations. In the event that a fisherman experiences gear loss or damage that they believe was caused by or the result of Atlantic Shores' activities, they should complete the attached form. Once the form and attachments are complete, please provide either (1) an electronic copy via email to Kevin Wark, Atlantic Shores Offshore Wind Fisheries Liaison at kevin.wark@atlanticshoreswind.com, with a copy to Doug Copeland at Doug.Copeland@atlanticshoreswind.com **OR** (2) mail a copy to:

Atlantic Shores Offshore Wind, LLC 1 Dock 72 Way FOA: Atlantic Shores (07-119) 7th Floor Brooklyn, NY 11205

ATTN: Kevin Wark, Fisheries Liaison

To have a claim reviewed, applicants must:

- 1. Contact Kevin Wark, Fisheries Liaison. to notify him of incident via cell phone (609) 290-8577.
- 2. Provide a complete, legible, executed application form.
- 3. Submit the completed application within 30 days of incident.
- 4. Include the following with application form:
 - · Copy of a valid fishing permit.
 - Proof that the vessel was fishing in the area with a vessel trip report (VTR) for the trip when gear was lost or sales slip for fish landings for period of gear loss/damage.
 - Proof of ownership of the vessel capable of fishing including photos and permit.
 - Copy of receipt for original purchase of fishing gear that was lost/damaged.
 - Sales slip or gear invoice for replacement or repair gear (must be identical to gear that was lost/damaged).
 - Location of gear loss/damage either GPS coordinates and/or photo of chart plotter

Process for claim review:

- Claims will be reviewed by Atlantic Shores Fisheries Liaison and a representative of Atlantic Shores.
- Applicants will be notified of the result of the review, in writing, within 30 days of receipt of a complete application.
- If the claim is found to be valid, a check will be provided to the Applicant.
- If the claim is denied, a written explanation will be provided to the Applicant.
- Applicants who disagree with the decision may file a written notice of appeal with Atlantic Shores, which Atlantic Shores will provide to a Third Party for review. The Third Party's decision will be final and not subject to any further right of appeal.

Applicants may not file multiple claims for gear loss in the same area. Prevention methods should be followed by all parties. Any payment in connection with will be considered a full release. Atlantic Shores reserves the right to request additional information to support review of claim.

[Application Form Appears on the Next Page





Application for Gear Loss Reimbursement

Fisherman Name:	
Phone Number:	
Fishing Vessel Name:	
Home Port:	_
State License #:	
Federal Permit #:	-
Gear Type:	-
Type of Gear Lost:	
Quantity:	
Replacement Cost:	
Total Damage Payment = \$	

Attachments to this Application Include:

- Copy of a valid fishing permit.
- Proof that the vessel was fishing in the area with a vessel trip report (VTR) for the trip when gear was lost or sales slip for fish landings for period of gear loss/damage.
- Proof of ownership of the vessel capable of fishing including photos and permit.
- Copy of receipt for original purchase of fishing gear that was lost/damaged.
- Sales slip or gear invoice for replacement or repair gear (must be identical to gear that was lost/damaged).
- Location of gear loss/damage either GPS coordinates and/or photo of chart plotter
- Completed W-9 form (https://www.irs.gov/pub/irs-pdf/fw9.pdf)

l,	, as the Applican	t hereunder, hereby state that I understan	ıd
		bursement does not guaranty payment. I	
further acknowledge	e and agree that if this claim is	accepted and paid, that acceptance of suc	h
payment constitutes	full, final and complete payme	ent for the claim and that neither Atlantic	
Shores Offshore Wir	nd, LLC, nor any of its affiliates,	contractors, agents and/or employees sha	all
have any further out	tstanding or ongoing liability o	r obligation with respect to this claim or t	he
damage of the gear	above described, and that I her	eby release and discharge Atlantic Shores	;
Offshore Wind, LLC,	its affiliates, contractors, agent	ts and employees from any and all such	
•		further acknowledge and agree that I sha	
•	•	nence, join in, prosecute, participate in, o	•
• •		y kind against Atlantic Shores Offshore	
Wind, LLC, or any of	f its affiliates, based upon this c	laim.	
l attest, unde	er penalty of periury, that to the	best of my knowledge the information in	n this
Application is true a		best of my knowledge the information in	
Signature		Date	
Please return this form	n and the attachments, including	a completed W-9 form, by: (1) delivering	
an electronic convivia	omail to Kavin Wark Atlantic Ch.	aras Offshara Wind Fisharias Ligisan at	

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Please note that the payment *cannot* be processed without a signature and W-9 form. Upon acceptance of the Application and confirmation of the validity of the claim, payment will be issued within 10 business days of such confirmation.