

## ANNEX XIV-A

Department of National Defence Project Registration and Environmental Assessment  
Review Process Form for Broughton Island, FOX-5.



# DND PROJECT REGISTRATION AND EARP DECISION FORM

|                                             |                             |                                                 |
|---------------------------------------------|-----------------------------|-------------------------------------------------|
| 1. Base/Station:<br>Broughton Island, FOX-5 | 2. Command: NDHQ/DGE        | 3. Province/Territory:<br>Northwest Territories |
| 4. Project No. (if applicable):             | 5. DSP No. (if applicable): | 6. Serial No. (if applicable):                  |
| 7. Location: 67° 33' N, 63° 49' W           |                             |                                                 |

|                                                                                |                                        |
|--------------------------------------------------------------------------------|----------------------------------------|
| 8. Project Title: Decommissioning of DEW Line facilities                       |                                        |
| 9. Study Conducted:                                                            |                                        |
| <input checked="" type="checkbox"/> Initial Screening - Using Class Assessment | <input type="checkbox"/> Yes           |
| <input type="checkbox"/> Initial Environmental Evaluation (IEE)                | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Environmental Impact Statement (EIS)                  |                                        |

|                                                                                                                |                                                                                       |
|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| 10. Assessment Decision:                                                                                       |                                                                                       |
| <input type="checkbox"/> Code 1 - Automatic Exclusion (Proceed) - Exclusion List Item No: <input type="text"/> | <input type="checkbox"/> Code 9 - Unacceptable Effects (Project Abandoned)            |
| <input type="checkbox"/> Code 2 - Insignificant Adverse Effects (Proceed)                                      | <input type="checkbox"/> Code 8 - Automatic Referral (Panel Review Required)          |
| <input checked="" type="checkbox"/> Code 3 - Adverse Effects Mitigable (Proceed)                               | <input type="checkbox"/> Code 7 - Significant Public Concern (Panel Review Required)  |
| <input type="checkbox"/> Code 4 - Effects Unknown (IEE Required)                                               | <input type="checkbox"/> Code 6 - Significant Adverse Effects (Panel Review Required) |
| <input type="checkbox"/> Code 5 - Mitigation Unknown (IEE Required)                                            | <input type="checkbox"/> Code 5 - Mitigation Unknown (IEE Required)                   |

|                                                              |                                                       |                                                              |                       |
|--------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------|-----------------------|
| 11. OPI (Directorate/Branch/Unit/Section):                   |                                                       |                                                              |                       |
| Recommended by<br><i>S. D. Bindon</i><br>(Screening Officer) |                                                       | Approved by<br><i>D. MacKinnon</i><br>(CO/Head/SFO/Director) |                       |
| Name, Rank, Position<br>S.D. Bindon<br>DO DLGU               | Name, Rank, Position<br>D. MacKinnon, LCol<br>PM DLGU | Phone No.<br>945-7736                                        | Phone No.<br>945-7931 |
| Date<br>10 Apr 95                                            | Date<br>10 Apr 95                                     |                                                              |                       |