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NUNAVUT IMALIRIYIN KATIMAYINGI
NUNAVUT WATER BOARD
OFFICE DES EAUX DU NUNAVUT

WATER LICENCE APPLICATION FORM

Application for: (check one)

☐ New ☒ **Renewal** ☐ Amendment ☐ Assignment ☐ Cancellation

LICENCE NO:
(for NWB use only)

| | |
|---|--|
| <p>1. NAME AND MAILING ADDRESS OF APPLICANT/LICENSEE</p> <p>Douglas Craig, M.Sc. Environmental Officer-DEW Line Clean Up Project Defence Construction Canada Constitution Square, Suite 1720 350 Albert Street Ottawa, ON K1A 0K3</p> <p>Phone: <u>613-998-7288</u> Fax: <u>613-998-0468</u> e-mail: <u>Douglas.Craig@dcc-cdc.gc.ca</u></p> <p>Alternate contact: Eva Schulz, P.Ag. Environmental Scientist AECOM 2540 Kensington Toad NW Calgary, AB T2N 3S3</p> <p>Phone: 403-270-9220 Fax: 403-270-0399 e-mail: <u>Eva.Schulz@aecom.com</u></p> | <p>2. ADDRESS OF CORPORATE OFFICE IN CANADA (if applicable)</p> <p>_____</p> <p>Phone: _____ Fax: _____ e-mail: _____</p> |
| <p>3. LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the Undertaking)</p> <p>Latitude: (68°48' " N) Longitude: (93°25' " W) NTS Map Sheet No. <u>57C</u> Scale: <u>1:50,000</u></p> | |
| <p>4. DESCRIPTION OF UNDERTAKING (attach plans and drawings)</p> <p>The purpose of the project is to collect sufficient information to assess the performance of the landfills from a geotechnical and environmental perspective. The landfill monitoring plan specifies the requirements for visual inspection, and chemical and thermal monitoring of landfills.</p> | |
| <p>5. TYPE OF PRIMARY UNDERTAKING (A supplementary questionnaire <u>must</u> be submitted with the application for undertakings listed in "bold")</p> | |

- | | |
|--|--|
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Agricultural |
| <input type="checkbox"/> Mining and Milling (includes exploration/drilling) | <input type="checkbox"/> Conservation |
| <input type="checkbox"/> Municipal (includes camps/lodges) | <input type="checkbox"/> Recreational |
| <input type="checkbox"/> Power | <input checked="" type="checkbox"/> Miscellaneous (describe below): |

Landfill monitoring, including the collection of soil and groundwater samples.

See Schedule II of *Northwest Territories Waters Regulations* for Description of Undertakings

6. WATER USE

- | | |
|---|---|
| <input type="checkbox"/> To obtain water | <input type="checkbox"/> Flood control |
| <input type="checkbox"/> To cross a watercourse | <input type="checkbox"/> To divert a watercourse |
| <input type="checkbox"/> To modify the bed or bank of a watercourse | <input type="checkbox"/> To alter the flow of , or store, water |
- ☒ Other (describe): To obtain groundwater samples.

7. QUANTITY OF WATER INVOLVED (cubic metres per day including both quantity to be used and quality to be returned to source)

Water use ☒ 100m³/day or less
☐ Greater than 100m³/day; if greater, indicate quantities to be used for each purpose (camp, drilling, etc.)

Water returned to source
0 m³/day

8. WASTE (for each type of waste describe: composition, quantity (cubic metres per day), methods of treatment and disposal, etc.)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Sewage | <input type="checkbox"/> Waste oil |
| <input type="checkbox"/> Solid Waste | <input checked="" type="checkbox"/> Greywater |
| <input type="checkbox"/> Hazardous | <input type="checkbox"/> Sludges |
| <input type="checkbox"/> Bulky Items/Scrap Metal | <input type="checkbox"/> Other describe): |

Sewage and greywater will be buried on-site. No other waste will be generated from the landfill monitoring program.

9. OTHER PERSONS OR PROPERTIES AFFECTED BY THIS UNDERTAKING (give name, mailing address and location; attach if necessary)

Land Use Permit

DIAND ☐ Yes ☒ No If no, date expected _____
 - Not required for landfill monitoring

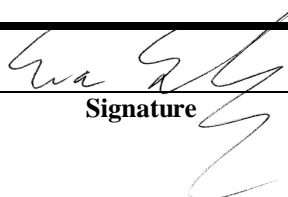
Regional Inuit Association ☐ Yes ☒ No If no, date expected _____

Commissioner ☐ Yes ☒ No If no, date expected _____

| | |
|------------|--|
| 10. | PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION MEASURES (direct, indirect, cumulative impacts, etc.) NIRB Screening <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, date expected _____ #04DN105 |
| 11. | INUIT WATER RIGHTS Will the project or activity substantially affect the quality, quantity, or flow of water flowing through Inuit Owned Lands and the rights of Inuit under Article 20 of the Nunavut Land Claims Agreement? N/A If yes, has the applicant entered into an agreement with the Designated Inuit organization to pay compensation for any loss or damage that may be caused by the alteration. If no compensation agreement has been made, how will compensation be determined? N/A |
| 12. | CONTRACTORS AND SUB-CONTRACTORS (name, address and functions) Biogenie S.R.D.C. Inc. 1809 Kakivak Court P.O. Box 1229 Iqaluit, NU X0A 0H0 Mr. Michel Pouliot, VP SAR Canada & USA (T) 867-979-5980 (F) 867-979-5985 (E) northern@biogenie-env.com |
| 13. | STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.) A full environmental clean up of the site was completed in 2007. No further studies have been completed. |
| 14. | THE FOLLOWING DOCUMENTS <u>MUST</u> BE INCLUDED WITH THE APPLICATION FOR THE REGULATORY PROCESS TO BEGIN Supplementary Questionnaire (where applicable: see section 5) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, date expected _____ Inuktitut and/or Inuinnaqtun/English Summary of Project <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, date expected _____ Application fee of \$30.00 (Payee Receiver General for Canada) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, date expected _____ Water Use fee of \$30.00 (unless otherwise indicated in Section 9 of the <i>NWT Waters Regulations</i> ; Payee Receiver General for Canada) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, date expected _____ |
| 15. | PROPOSED TIME SCHEDULE (unless otherwise indicated, the NWB will consider the application for a five (5) year term) <div style="text-align: center;"> <input type="checkbox"/> one year or less (or) <input checked="" type="checkbox"/> Multi Year </div> Start Date: <u>July 1, 2010</u> Completion Date: <u>September 30, 2030</u> |

Eva Schulz
Name (Print)

Environmental Scientist
Title (Print)


Signature

February 26, 2010
Date

For Nunavut Water Board office use only

APPLICATION FEE **Amount: \$**_____ **Pay ID No.:** _____

WATER USE DEPOSIT **Amount: \$**_____ **Pay ID No.:** _____