

Application for: (check one)

P.O. Box 119

GJOA HAVEN, NU XOE 1JO

TEL: (867) 360-6338 FAX: (867) 360-6369 KATJMAYINGI בישה אברת שמדבת BOARD NUNAVUT IMALIRIYIN

## WATER LICENCE APPLICATION FORM

New AmendmentRenewal	Assignment
LICENCE NO: (for NWB use only)	
1. NAME AND MAILING ADDRESS OF APPLICANTALICENSEE  A.M.C.P.H.E.R.S.O.N.	2. ADDRESS OF CORPORATE OFFICE IN CANADA (if applicable)
391-56 ST. DELTH B.C V4L1Z4	
Phone: 404 943 0779 Fax: 604 943 01711 e-mail:	Phone:Fax: e-mail:
3. LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the Undertaking)	
Langitude	NTS Map No. <u>8605</u> Scale
Lantude:Longitude:	N 15 Map No. 2 Scale
4. DESCRIPTION OF UNDERTAKING (attach pi	ans and drawings)
EXPLORING FOR MINERAL	
DEPOSITS	
5. TYPE OF UNDERTAKING (A supplementary q undertakings listed in "bold")	uestionnaire must be submitted with the application for
Industrial Remote/Tourism Mine Development Municipal	Camps
Advanced Exploration Power Exploratory Drilling Other (describe):	

6. WATER USE		
	To divert a watercourse	
To modify the bed or bank of a watercourse	Flood control	
To alter the flow of, or store, water	Other (describe);	
To cross a watercourse		
7. QUANTITY OF WATER INVOLVED (litres per s		
including both quantity to be used and quality to be returned to source)  12000 LITERS DAY FOR 30 DAYS DICILL		
22000 LITERS DAY FO	IR 30 DAYS DICILL	
CAMP 1000 GAL DAY FOI	2 60 DAYS	
8. WASTE (for each type of waste describe: composition	n, quantity, methods of treatment and disposal, etc.)	
	45450	
	CENERATEORFLYOUT	
Solid Waste Greywater		
Hazardous Sludges Bulky Items/Scrap Metal Other (describe):		
Bulky Rems/Serap Metal		
THE PARTY OF THE P		
<ol> <li>PERSONS OR PROPERTIES AFFECTED BY THe location; attach if necessary)</li> </ol>	IIS UNDERTAKING (give name, mailing address and	
	-	
location; attach if necessary)  Land Use Permit    ±0 L CO -61/860 /-	-	
Land Use Permit ±0 L CO - 61/860 F	PERMIT KIL1020013	
location; attach if necessary)  Land Use Permit    LOC - 61/860 /-  DIAND    Yes No If no Regional Inuit Association Yes No If	date expected	
location; attach if necessary)  Land Use Permit    LOC - 61/860 /-  DIAND    Yes No If no Regional Inuit Association Yes No If	date expected	
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Land Use Permit    Location; attach if necessary)  Land Use Permit    Location; attach if necessary)  DIAND	date expected  date expected  date expected  UNDERTAKING AND PROPOSED MITIGATION  If no, date expected  Date of the proposed of t	

11. (Continued)
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?
BY EXISTING TEEGULATIONS
12. CONTRACTORS AND SUB-CONTRACTORS (name, address and functions)
MAJOR MIDWEST DRILLING
Be 20 1377-337 OLD AIR PORT RD VKNT  13. STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.)
13. STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.)
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) Yes No If no, date expected
Inuktitut/English Summary of Project Yes X No If no, date expected MAY 02
Application fee \$30.00 (c/o of Receiver General for Canada)
15. PROPOSED TIME SCHEDULE
Annual (or) \( \frac{\text{\tiket{\texictex{\text{\texictex{\texi{\texictex{\texi{\texictex{\texi{\texictex{\texi{\texi{\texi{\texi{\texi{\texictex}\texit{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\
Start Date: JUNE 7002 Completion Date: 5EPT 7002
FLEX MCPHERSON a. McPherson MAY 7 200-
Name (Print) Title (Print) Signature Date
or Nunavut Water Board use only APPLICATION FEE Amount: \$ 36.00 Receipt No.:
VATER USE DEPOSIT Amount: \$ Receipt No.: