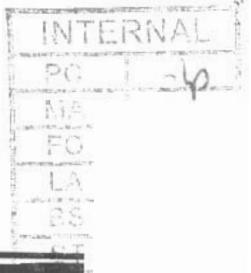




P.O. Box 119
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KATIMAYINGI

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NUNAVUT WATER BOARD
NUNAVUT IMALIRIYIN



WATER LICENCE APPLICATION FORM

Nunavut Water
Board

MAY 24 2005

Public Registry

Application for: (check one)

New Amendment Renewal Assignment



1. NAME AND MAILING ADDRESS OF APPLICANT/LICENSEE City of Iqaluit P.O. Box 460 Iqaluit, Nunavut X0A 0H0 Phone: <u>867-975-8500</u> Fax: <u>867-975-8505</u> e-mail: <u>bsokach@city.iqaluit.nu.ca</u>		2. ADDRESS OF CORPORATE OFFICE IN CANADA (if applicable) Phone: <u>N/A</u> Fax: _____ e-mail: _____
3. LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the Undertaking) Latitude: <u>63°45'N</u> Longitude: <u>68°31'W</u> NTS Map No. <u>25N/9, 25N/10, 25N/15, 25N/16</u> Scale <u>1/50,000</u>		
4. DESCRIPTION OF UNDERTAKING (attach plans and drawings) Extraction of Granular Material from N40 Gravel Pit		
5. TYPE OF UNDERTAKING (A supplementary questionnaire <u>must</u> be submitted with the application for undertakings listed in "bold") <input type="checkbox"/> Industrial <input type="checkbox"/> Remote/Tourism Camps <input type="checkbox"/> Mine Development <input type="checkbox"/> Municipal <input type="checkbox"/> Advanced Exploration <input type="checkbox"/> Power <input type="checkbox"/> Exploratory Drilling <input checked="" type="checkbox"/> Other (describe): <u>Extraction of Granular Material</u>		
6. WATER USE		

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

Not Applicable

7. **QUANTITY OF WATER INVOLVED** (litres per second, litres per day or cubic metres per year, including both quantity to be used and quality to be returned to source)

Not Applicable

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

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

Not Applicable

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

Land Use Permit

DIAND	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> V <input type="checkbox"/> No If no, date expected _____
Regional Inuit Association	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> V <input type="checkbox"/> No If no, date expected _____
Commissioner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> V <input type="checkbox"/> No If no, date expected _____

10. **PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION MEASURES** (direct, indirect, cumulative impacts, etc.)

NIRB Screening	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> V <input type="checkbox"/> No If no, date expected _____
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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?

No

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?

12. CONTRACTORS AND SUB -CONTRACTORS (name, address and functions)

Kudlik Construction Ltd.
Tower Arctic Ltd.
R.L. Hanson Ltd.
Baffin Building Systems Ltd.

13 STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.)

North 40 Gravel Pit Granular Extraction Procedure Manual

14. THE FOLLOWING DOCUMENTS MUST BE INCLUDED WITH THE APPLICATION FOR THE REGULATORY PROCESS TO BEGIN

Supplementary Questionnaire (where applicable: see section 5) Yes No If no, date expected N/A

Inuktitut/English Summary of Project Yes No If no, date expected _____

Application fee \$30.00 (c/o of Receiver General for Canada) Yes No If no, date expected May 24, 2005

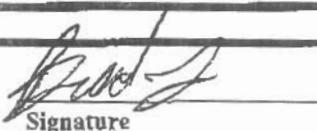
15. PROPOSED TIME SCHEDULE

Annual (or) Multi Year

Start Date: June 2005 Completion Date: June 2015

Brad Sokach
Name (Print)

Director of Engineering
Title (Print)


Signature

May 20/05
Date

1. Name of Water Supply and Application Fee	Amount	Receipt No.
2. Other Use Deposited	Amount	Receipt No.