



P.O. Box 119
GJOA HAVEN, NT XOE 1J0
TEL: (867) 360-6338
FAX: (867) 360-6369

ᓃᓇᓂᓪ ᐃᓕᓕᓂᓪ ᑲᓂᓕᓂᓪ
NUNAVUT WATER BOARD
NUNAVUT IMALIRIYIN KATIMAYINGI

WATER LICENCE APPLICATION FORM



Application for: (check one)

☒ New ☐ Amendment ☒ Renewal ☐ Assignment

LICENCE NO:

(for NWB use only)

nwb2BRO

1 NAME AND MAILING ADDRESS OF
APPLICANT/LICENSEE

KENNECOTT CANADA EXPLORATION
INC.
354-200 GRANVILLE ST
VANCOUVER, BC V6C 1S4

Phone: 604-669-1880

Fax: 604-669-5255

e-mail: diane.gregory@kennecott.com

2. ADDRESS OF CORPORATE
OFFICE IN CANADA (if applicable)

Same

Phone: _____

Fax: _____

e-mail: _____

3 LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the undertaking)

General Prospecting, Till & Stream Sediment Sampling on
Crown Land Prospecting Permit areas (as shown on attached map).

Latitude: 72°20' - 73°45' Longitude: 85° - 90° NTS Map No. C48B+C
058A+D Scale _____

4 DESCRIPTION OF UNDERTAKING (attach plans and drawings)

Prospecting; Till & Stream Sediment Sampling.

5. TYPE OF UNDERTAKING (A supplementary questionnaire must be submitted with the application for undertakings listed in "bold")

- ☐ Industrial
- ☐ Mine Development
- ☐ Advanced Exploration
- ☐ Exploratory Drilling

- ☐ Remote/Tourism Camps
- ☐ Municipal
- ☐ Power
- ☐ Other (describe): PROSPECTING

6. **WATER USE**

- ☒ To obtain water (Camp Use ONLY)
☐ To modify the bed or bank of a watercourse
☐ To alter the flow of, or store, water
☐ To cross a watercourse

- ☐ To divert a watercourse
☐ Flood control
☐ Other (describe): _____

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)

100 - 500 L/day (depends on number of persons in camp)

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

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

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"/> No | If no, date expected <u>JUNE 1/2001</u> |
| Regional Inuit Association | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If no, date expected <u>JUNE 1/2001</u> |
| Commissioner | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If no, date expected <u>N/A</u> |

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

NIRB Screening ☐ Yes ☐ No If no, date expected _____

No impact from prospecting
 Camp: - all combustibles burned; all solid non-combustibles removed.
 - grey water sumps.
 - fuel storage (see attached Spill Plan)

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

Helicopter (possibly CANADIAN HELICOPTERS).

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

None

13. 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 _____

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 _____

14. PROPOSED TIME SCHEDULE

☒ Annual (or) ☐ Multi Year

Start Date: JUNE 1, 2001

Completion Date: SEPTEMBER 1, 2001

DIANE J GREGORY

LAND MANAGER

Diane J Gregory

April 20/01

Name (Print)

Title (Print)

Signature

Date

For Nunavut Water Board use only

APPLICATION FEE

Amount: \$ _____ Receipt No.: _____

WATER USE DEPOSIT

Amount: \$ _____ Receipt No.: _____