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WATER LICENCE APPLICATION FORM

Application for: (check one) New Renewal Amend	ment Assignment Cancellation	
LICENCE NO: (for NWB use only)		
1. NAME AND MAILING ADDRESS OF APPLICANT/LICENSEE	2. ADDRESS OF CORPORATE OFFICE IN CANADA (if applicable)	
Stornoway Diamond Corporation Unit 116-980 West 1 st Street North Vancouver, BC V7P 3N4	Stornoway Diamond Corporation Unit 116-980 West 1st Street North Vancouver, BC V7P 3N4	
Phone: 604-983-7750 Fax: 604-987-7107 e-mail: nwestcott@stornowaydiamonds.com	Phone: 604-983-7750 Fax: 604-987-7107 e-mail: nwestcott@stornowaydiamonds.com	
3. LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the Undertaking) Please see the attached figures for the proposed land use area. Latitude: (° ' "N) Longitude: (° ' "W) NTS Map Sheet No. 86 I/15 Scale: 1:25,000 and 1:5,000,000		
4. DESCRIPTION OF UNDERTAKING (attach plans and drawings) Please see attached project description.		
5. TYPE OF PRIMARY UNDERTAKING (A supplementary questionnaire <u>must</u> be submitted with the application for undertakings listed in "bold")		
☐ Industrial ☐ Mining and Milling(includes exploration/drilling) ☐ Municipal (includes camps/lodges) ☐ Power	Agricultural Conservation Recreational Miscellaneous (describe below):	
See Schedule II of Northwest Territories Waters R	egulations for Description of Undertakings	

6.	WATER USE	
	☐ To cross a watercourse ☐ To divert a watercourse ☐ To modify the bed or bank of a watercourse ☐ To alter the flow of, or store, water	
	Other (describe):	
7.		
	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	
	Compared to the control of the contr	
8.	WASTE (for each type of waste describe: composition, quantity (cubic metres per day), methods of treatment and disposal, etc.)	
		
	Hazardous Sludges	
	Bulky Items/Scrap Metal Other describe):	
9.		
	address and location; attach if necessary)	
	Land Use Permit DIAND Yes No If no, date expected N/A	
	Regional Inuit Association \square Yes \square No If no, date expected $\underline{N/A}$	
	Commissioner \square Yes \square No If no, date expected $\underline{N/A}$	
10.	PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED	
	MITIGATION MEASURES (direct, indirect, cumulative impacts, etc.)	
	NIRB Screening \square Yes \boxtimes No If no, date expected $\underline{N/A}$	
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	
	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)		
Contractors are selected on an annual basis.		
13. STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.)		
N/A		
14. THE FOLLOWING DOCUMENTS MUST BE INCLUDED WITH THE APPLICATION FOR THE REGULATORY PROCESS TO BEGIN		
Supplementary Questionnaire (where applicable: see section 5)		
Inuktitut and/or Inuinnaqtun/English Summary of Project		
Application fee of \$30.00 (Payee Receiver General for Canada) Xes No If no, date expected		
Water Use fee of \$30.00 (unless otherwise indicated in Section 9 of the NWT Waters Regulations; Payee Receiver		
General for Canada) Yes No If no, date expected		
15. PROPOSED TIME SCHEDULE (unless otherwise indicated, the NWB will consider the application for		
a five (5) year term) one year or less (or) Multi Year		
Start Date: June 1, 2010 Completion Date: September 30, 2012		
Stornoway Diamond Corporation		
Name (Print) Name (Print) Title (Print) Name (Print) Name (Print) Name (Print)		
For Nunavut Water Board office use only		
APPLICATION FEE Amount: \$ Pay ID No.:		
WATER USE DEPOSIT Amount: \$ Pay ID No.:		