

P.O. Box 119 GJOA HAVEN, NT XOE 1JO

Tel: (867) 360-6338 FAX: (867) 360-6369

200 ALCRY BULYSP NUNAVUT WATER BOARD NUNAVUT IMALIRIYIN KATIMAYINGI

NO CHANGE

APPLICATION FORM

Application for licence, amendment to licence, or renewal of licence Renewal of NWB2 VIC (NWB2 ROC APPLICATION/LICENCE NO: (Amendment or renewal only) NAME AND MAILING ADDRESS OF 2. ADDRESS OF HEAD-OFFICE IN APPLICANT/LICENSEE CANADA IF INCORPORATED Phone: Fax: Phone:_ LOCATION OF UNDERTAKING (describe and attach a map, indicating watercourse and location of 3,any proposed waste deposits) Latitude: Longitude:____ DESCRIPTION OF UNDERTAKING (describe and attach plans and drawings) 5. TYPE OF UNDERTAKING ☐ Industrial □ Power □ Agricultural ☐ Mining and Milling ☐ Conservation Recreation ☐ Municipal ☐ Other (describe): ___ WATER USE ☐ To obtain water ☐ Flood control ☐ To cross a watercourse ☐ To divert water ☐ To modify the bed or bank of a water ☐ To alter the flow of, or store, water ☐ Other (describe):_ QUANTITY OF WATER INVOLVED (litres per second, litres per day or cubic metres per year, 7. including both quantity to be used and quality to be returned to source.)

| 8. | WASTE DEPOSIT (ty | pe, quantity, qualit | y, treatment, and disposal) | |
|-------------------------------------|--|--|--|--------------------------|
| 9, | OTHER PERSONS O mailing address and loc | | AFFECTED BY THIS UNDER | RTAKING (give name, |
| 10. | PREDICTED ENVIRONMENTIGATION MEAS | | PACTS OF UNDERTAKING A | AND PROPOSED |
| 11. | CONTRACTORS AN | D SUB-CONTRA | CTORS (name, address and fun | actions) |
| 12. | STUDIES UNDERTA | KEN TO DATE (| list and attach copies of studies, | reports, research, etc.) |
| | | | | |
| 13. | THE FOLLOWING | OCUMENTS SH | ALL BE INCLUDED WITH T | THE APPLICATION |
| Land DI | THE FOLLOWING D Use Permit AND gional Inuit Association | [] Yes [] No | Date Expected | |
| Land DI Re | Use Permit AND | [] Yes [] No | Date Expected | |
| Land DI Re Suppl | Use Permit AND gional Inuit Association | [] Yes [] No [] Yes [] No | Date Expected Date Expected Date Expected | |
| Land DI Re Suppl Inukti | Use Permit AND gional Inuit Association ementary Questionnaire | [] Yes [] No [] Yes [] No [] Yes [] No | Date Expected Date Expected Date Expected Date Expected | |
| Land DI Re Suppl Inukti | Use Permit AND gional Inuit Association ementary Questionnaire tut Summary of Project @ 1:250,000 | [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No | Date Expected Date Expected Date Expected Date Expected | |
| Land DI Re Suppl Inukti MAP (with | Use Permit AND gional Inuit Association ementary Questionnaire tut Summary of Project @ 1:250,000 camp, drill sites, etc.) | []Yes[]No []Yes[]No []Yes[]No []Yes[]No []Yes[]No | Date Expected Date Expected Date Expected Date Expected | |
| Land DI Re Suppl Inukti MAP (with | Use Permit AND gional Inuit Association ementary Questionnaire tut Summary of Project @ 1:250,000 camp, drill sites, etc.) PROPOSED TIME SO Date: | []Yes[]No []Yes[]No []Yes[]No []Yes[]No []Yes[]No | Date Expected Date Expected Date Expected Date Expected Date Expected Date Expected | |