

HAMLET OF ARVIAT

P.O. BOX 150 ARVIAT, NUNAVUT XOC-QEO

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FACSIMILE TRANSMISSION

Date: September 11, 2003

To: Nunavut Water Board

Gjoa Haven, Nunavut

From: Ronald Suluk

Planning & Lands Administrator

Hamlet of Arviat

Email- ronsuluk@allstream.net

Fax Number: (867) 360-6369 Phone number: (867) 360-6338

Number of pages to follow: 24

Subject:

Supplementary questionnaire-Hamlet of Arviat

The questionnaire is attached and I have completed what I can. I sent it to Bryan Purdy to assist in the completion of some questions but did not get a response from him. If you require any other information, feel free to contact myself.

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030911NWB3ARV SUPP Quest-14AE



P.O. Box 119

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NUNAVUT WATER BOARD

NUNAVUT IMALIRIYIN KATIMAYINGI

Nunavut Water Board

SEP 1.1 2003

Public Registry

Water Licence Application
Supplementary Questionnaire
for Municipalities

INTE	RNAL
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030911NWB3ARV SUDD QUEST-ILAE

I.	GEN	ERAI	
	1.	Date	Sept. 5/03
	2.		cant: Arviat, Kivalia Municipality and Region
	3.	Cont	Name of Contact
			Level Administrator Position
			(867) 857 - 2519 Telephone # Fax #
	4.	Com	munity Status: Village Town City Hamlet Settlement Corporation
موفقة من ر	5.		ate the status of the municipality's licence on the date of the application. New Application Renewal - Water Licence #
II.	ATT	- 'ACHN	
	1.	Attac	current or up-to-date detailed map(s) showing the locations of the:
		a.	raw water intake;
		b .	water storage and treatment facilities;
		C.	fuel and chemical storage;
		đ.	sewage treatment facilities (lagoon, honey bag pit, we land);
		e. E	wastewater treatment area and discharge outlets;
		f.	solid waste disposal areas and drainage patterns;
		g. b	hazardous waste disposal area; transportation access routes;
		i.	existing water bodies/courses and any changes to these water bodies/courses that have or may
		Α.	occur as a result of water use or waste disposal facilities, locations of environmental monitoring
			sites. (Outline drainage basin);
		j.	Traditional use areas outlined on site map and areas around the community used for recreation,
		_	camping, fishing, etc.
		k.	abandoned and/or restored water treatment, sewage, and solid waste disposal facilities.
-		Are n	aps attached? Yes _ No
		If no	please indicate when they will be available.
		Plant.	

		Indicate which organization has provided the various maps or diagram
ım.	WAT	ER SUPPLY
	Water	r Source
	1.	Type of source: Lake RiverWell Other
	2. 3.	Name of water source and alternative, if any.
		Primary Source Secondary Source
	3.	Usual break-up & freeze-up period: Break-up Breeze-up
	Water	Intake
	1.	Please provide short descriptions for the following:
y **		a. Freshwater intake facility
		b. Operating capacity of pumps used
		c. Intake screen size
	Water	Storage
	1.	Type of water storage facility. (check where applicable) Reservoir/Pond Storage tank None
		OtherDescription:

2. If "reservoir" checked:

Is the reservoir lined? ____ Yes ___ No

What type of liner? _____ When was it installed?

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					ļ			
Water	Treatment		į					
1.	Indicate the	quality of the	water					
*•	IIIOOPARC IIIO	Summer:	WELLOW.	good	fair	poor	•	
		Fall:	-	good	fair	poor		
		Winter:	 	good	fair	poor		
•		Spring:		good	fair	poor	:	
			į					
2.	Describe.							
			:					
			:		1			
			İ					
3. Ty	pe of water to	eatment.			ĺ			
	ī	Filtration and	chlorida	ation				
		Chlorination of		icion				
		Vone			İ			
		Other	Day	scription				
			D \$6	scription				
					į			
	Use And Dist	+ +						
1.	Volume of w	ater use:	!		<u> </u>			
	Distribution	····	Estima	ted number of	Listimated	average water	Total water	
				on the system	consumpti	ion	consumption	
				A	(Litres/cap		(Litres/day)	
.—				.4		В	AxB	
	PIPE							
	TRU	CKED				TOUT		
	<u>L </u>					TOTAL		

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General	Condition	of the	water	supply ;	acilities
---------	-----------	--------	-------	----------	-----------

1.	Gener	al condition of the:		
	a.	Water supply facility Satisfactory	_ Unsatisfactory	
		If unsatisfactory, explain.		
	b.	Storage facility Satisfactory	_ Unsatisfactory	
		If unsatisfactory, explain.		
	C,	Distribution system Satisfactory	_Unsatisfactory	
		If unsatisfactory, explain.		
	Modif	fications .		
	1.	Are there any changes plann No Yes	ed for the water supply sy	stem?
		If yes, please attach a copy o implementation schedule.	f the plan, or describe cha	nges. Provide information on the
	2.	Does the community believe Describe.	changes needed to the wa	ater supply, storage or treatment facilities?

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	tification there signs identifying drinking water sources presently usYesNo	sed by the municipality?
IV.	SEWAGE DISPOSAL	
1.	What type(s) of sewage treatment does the community Lagoon Mechanical system Wetland Honey bag Combination/Other: describe	have?
Lago	oon (if applicable)	
1.	Has there been any operating problems with the lagoon Yes No If yes, describe Sewase level has almost rach the for at the occultures.	
Mecl	hanical System (if applicable) Describe (type, specifications, operation and maintens wastewater treatment system).	ince program for the mechanical
2.	Are sludges produced?YesNo If yes, describe how the sludges are disposed of:	
Wetla l	and(if applicable) Describe the Wetland wastewater treatment system.	

Honey Bag Pit 1. Does the municipality use a honey bag pit? Yes No If yes, describe the location, drainage, and on	peration/maintenance of the site:
the wastewater treatment system that may af	strial liquid waste being discharged or deposited to feet the quality of the effluent or leachate produced? commercial or industrial discharge has to be
Sewage Discharge 1. Are fish, shell fish and other wildlife harvested. X Yes No If yes, indicate species harvested, and level of Beloga whele - July to Jestimber Achichar - July to Jestimber	

__ Unsatisfactory

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a.

General Condition of the sewage treatment facilities

Sewage collection system

X Satisfactory
If unsatisfactory, explain.

General condition of the:

b. Discharge control system

Satisfactory

XUnsatisfactory

If unsatisfactory, explain.

The series & surge in inorquete in sets with somese coming in

c. Dams, diversion dykes, berms

X Satisfactory

. __ Unsatisfactory

If unsatisfactory, explain.

Modifications

1. Are there any changes planned in the sewage treatment facilities?

__ No ____ Yes

If yes, please attach a copy of the plan, or describe changes. Provide information on the implementation schedule.

A new 199-on planned to be constructed text to the existing las com-

2. Does the municipality or residents believe changes are needed to the sewage treatment facilities? Describe.

Ves, cornert laguou mill not hold the capacity or sewage for the aring years.

Abandonment and Restoration

1. List and describe abandoned or restored sewage treatment facilities.

Refer to original attachment maps.

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Identi	fication Are there signs identifying past and present sewage disposal sites? Yes X No
v.	SOLID WASTE DISPOSAL
1.	Briefly describe how solid wastes are collected and delivered to the disposal area.
2.	Is the solid waste site fenced? Yes No
3.	Is the fence adequate?Yes No
	If no, describe
Waste	Reduction Does the municipality burn garbage ?
	Yes No If yes, describe how and when this is done.
2.	Has the municipality considered measures for waste reduction such as recycling or reuse? YesNo
	If yes, describe
_	d Carcasses Pit
1.	Does the municipality have an area for the disposal of animal carcasses?

	c. Operation and maintenance	e (describe special	handling/o	lisposal methods	for these wastes)
Gener	al Condition of the Solid Waste I Comment on the general condition		ı		
8.	Solid waste disposal area Satisfactory Un If unsatisfactory, explain.	satisfactory			
Modif 1.	ications Are there any changes planned for NoYes If yes, attach a copy of the plan, schedule.	,			the implementation
2.	Are changes needed to the solid	waste disposal area	a? Describe	: .	
Abana 1.	donment and Restoration List and describe abandoned or a Indicate their location on a map.	restored solid wast	e facilities.		
Identi	fication Are there signs identifying past a Yes No	nd present solid wa	iste dispos	al sites ?	·
VI.	INSPECTION AND MONITO	RING			
1.	When were municipal facilities in Indian and Northern Affair Municipal and Community Page 11 of 24	Inspector	Date:	ing 2003	

	Other:	Date:	
2.	Is there a system in place for report Yes X No If yes, describe.	rting spills?	
3.	Is there a contingency plan for cle Yes X No If yes, describe.	an up of spills?	
4 .	Have any spills occurred in the parties. Yes X No If yes, describe and show on a manaffected areas?		What action has been taken to clean the
Monit 1.	oring Program Is water sampling and analysis do Yes X_No	ne 7	
	If Yes, answer the questions a to	•	
	a. Briefly describe how sam	ples are taken and sent to the	laboratory.
	b. Briefly describe any monit	toring done for wastewater e	ffluent and leachate.
	c. Who is responsible for wa	ter sampling ?	

VII.

	Position:
	Telephone #:
	Fax #:
	Level of training:
d.	Recognized laboratory performing analysis of samples.
	Name:
	Address:
	Telephone #:
	Fax #:
в.	Are any changes planned in the water quality monitoring program? Yes No If yes, describe.
	IC CONCERNS
1.	What concerns does the municipality or residents have regarding the municipal water supply or waste disposal facilities? List the concerns and describe what steps have been taken to address
	The smell of the sewage legion meches the four when winds are
	ning from the South.
7	The exist longoon will not hold or meet the capacity required -

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VIII. you have diffic	PUBLIC HEALTH (Help may be obtained from the culty with this section.)	Regional Environmental Health Officer if
1.	Date:	
2.	Municipality:	
3.	Contact: (Environmental Health Officer Contact)	
	Telephone #: (9,6-) 95) - 3100	
	Fax #:	
4.	Have there been any problems or health/environmentYesNo	al concerns with drinking water ?
	If yes, describe	
5.	Have there been any problems or health/environmentYes No	al concerns with sewage disposal/treatment?
	If yes, describe	

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6.	Have there been any probl	ems or health/environmental	concerns wit	b solid waste disposal?
	If yes, describe			
Monite	oring Program			
1.	Does the Regional Health	Board perform water quality answer questions (a) to (e)	sampling?	
a .	Briefly describe the sample	ing methodology.		
b.	Briefly describe any monit	oring of wastewater effluent	and leachate	
c.	Who is responsible for san Name:	opling?		
	Position:			
	Telephone	#:		
	Fax #:			
	Level of tra	uning:		
d.	Recognized laboratory per	forming analysis of samples		

Name:

	Δ	.ddress:	
		'elephone #:	
	F	ax # :	
	e. Are any changes planned YesNo If yes, describe.	i in the water quality monitor	ug program?
IX.	TECHNICAL INFORMATION Government (CG&T) office if years	N (Assistance may be obtain ou have difficult with this sec	ed from the Regional Community tion).
1.	Date;		
2.	Municipality:		
3.	Contact: (Community Government and T	ransporation Representative)	
	Telephone #		
	Fax #		
4.	Population (according to most re	ecent census results):	
5.	Estimated growth rate over next	5 years:	
б.	Has any baseline data collection and chemical characteristics of the YesNo	and evaluation been undertak le main water bodies in the ar	en with respect to the physical, biological, ea?
	If yes, provide a summary of pro	gram details or site title, auth	ors, cities, and dates:
	Prepared by	<u>Title</u>	Completion Date
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				!		
					j	
	If no,		studies being pla			
		N	oYes (If yes	, when and by whom):		
				; !		
7.	Have !		een consulted in t Yes	he collection of baselin	e data on main wa	ter bodies in the area?
	If ves.	specify.				
	J - 1,	-I				
				<u>;</u>		
				! !		
8.	Hac at	v hoceli	ne data collection	and avaluation been up	adortokon with roo	pect to the various biophysical
0.	compo	onents of	the environment	potentially affected by	the project?	pect to the various prophysical
		No			-	
	If ves.	provide	details below.	; ;		
),	F				
	Prepar	red by		<u>Title</u>		Completion Date
				:		
	•			:		
	If no,	are such No	studies being plan _Yes.	naed?		
	If yes,	specify:				
		-		1		
Attachi.		detailed	plan or drawings	(s) of the present solid :	waste disposal ara	ea. Include the following
	intonn	ation:	*	i	waposut tile	w. morane the tonowing
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- a. details of pond size and elevation;
- b. details of all retaining structures (dimensions, materials of construction, etc.);
- c. details of the drainage basin, and existing and proposed drainage modifications;
- d. details of all decant, siphon mechanisms etc., including sewage treatment facilities;
- e. details regarding direction and path of wastewater flow from the area;
- f. distance from watercourses and fish bearing waters;
- g. location and construction of liners;
- h. leachate and groundwater collection systems; and
- i. control structures.
- 2. Attach detailed plan or drawing(s) of the present sewage treatment system. The drawing(s) should include the following:
 - a. details of all retaining structures (dimensions, materials of construction, etc.);
 - b details of the drainage basin, and existing and proposed drainage modifications;
 - c. details regarding direction and path of wastewater flow from the area;
 - d. indications of the distance from watercourses and fish bearing waters;
 - e. all sources of seepage presently encountered near these areas, including volumes (m³/day) and directions.
 - f. The volume of seepage flow (m³ / day); and
 - g. The direction of each flow

The above internation can be found in the design propages by

FSC Architects and Engineers, which was sent with the ensised

application.

3.	Yes K No	ge treatment system attacher
	If Yes, who has provided them ?	
	If no, indicate when they will be available. At and y sun!.	
Hvði	rology	
1.	Effects on surface water flow:	
_		Yes XNo
	Are any stream channels altered? Is the natural storage or water level of any lake or pond	changed? Yes No
	Are there changes in water flow downstream of the pro-	
No	Is a storage reservoir created in a natural channel?	Yes <u>X</u>
	If yes to any of the above, briefly describe the expected	change in flow or storage:
2.	Drainage Area: What is the drainage area? What is the average elevation of the drainage basin? Is the drainage basin outlined on an attached map?	<u>6</u> metres <u>x_</u> YesNo
	Describe the drainage basin characteristics, (vegetation swamps and permafrost areas, etc.)	
3.	Channel characteristics:	
	Is the course of any channel changed?	YesNo
	If yes, describe measures to maintain stream bed and ba	nk stability.

4.	Will the cross-section of any watercourse be changed?	Yes 🗶 No
	If yes, describe the change and its effect on the flow cap	pacity of the channel.
	i	

Water Supply

1.	What is the rate of withdrawal from the source?	l n	n³/day
A -	- 1 mar to the rate of whither that Wolff the source: -	++	m / va

- 2. Is water drawn from the source ____intermittently ____continuously
- 3. If it is drawn intermittently, during what month(s) is it drawn?
- 4. For what period is it drawn (days/weeks/months)?
- 5. What is the rate of flow of source (if river) or size (if lake)?
- 6. At the intended rate of water usage, describe the effects on the river or lake from which water will be drawn.

Water Intake

- Please provide short descriptions of the following:
 - a. freshwater intake facility

b. operating capacity of the pumps

c. intake screen size

Water	Storage
-------	---------

1.	Is a dam or dyke being used to store or alter the flow o	f water?YesNo
2.	What are the dimensions of the dam or dyke? Length: Width: Height: U/S slope: D/S slope:	
3.	Does the proposed dam create a reservoir in a natural v YesNo If yes, what is the storage capacity and surface area of ha.	
4.	Will the dam or dyke affect fish migration or movement Yes No If yes, describe all measures for compensation of fish hadyke, and mitigation for fish migration or movement.	
Water	Treatment	
1.	Indicate the capacity of the treatment facility.	L/min
2.	What is the capacity of the water storage facility.	m³
3.	Describe the method of water treatment (i.e., backwash sedimentation, chemicals used), and provide the results bacteriological and chemical analysis. Attach a diagram	of the most recent
4.	Are there any changes planned in the water treatment far	cilities?

	If yes, attach a copy of the plan or indicate changes and include an implementation schedule.
	Include excerpt from MACA Capital Plan if available.
Sewag	e Disposal
1.	Indicate the level of sewage treatment:
	x primary secondary tertiary
	Pre-treatment (if applicable): screening maceration
	Lagoons (if applicable): anaerobic serobic facultative
2.	Indicate the capacity of the sewage treatment facility 74800 m ³
3.	Based on current population projections, the facility will meet the needs of the community until the year <u>2004?</u> .
4.	Average depth of the wastewater lagoon m.
5.	What is the design freeboard? m.
6.	Indicate the retention time of the sewage while in the treatment facility days.
7.	Indicate the estimated rate of discharge of wastewaterL/sec.
8.	Indicate the location of the discharge point
9.	Is the discharge: seasonal continuous
	If the discharge is seasonal, during what month(s) is it done? What is the duration of the discharge (days/weeks/months)?
10.	Are there any changes planned in the sewage disposal facilities? No Yes
	If yes, attach a copy of the plan or indicate changes and include an implementation schedule. Han the new layers this sense?
	Include excerpt from MACA Capital Plan if available.

Solid	Waste	Disna	елТ
	77 W30C	~wv.	JUL

- 1. Indicate the capacity of the disposal area _____ m³
- 2. The average depth of the solid waste disposal site _____ m
- 3. The current facility will meet community needs until the year ______.

4. Do any natural watercourse enter the solid waste disposal area? What methods are used to decrease the amount of runoff water entering these areas?

5. Indicate the volume of water that may enter these areas from any source(s) and attach all pertinent details of the diversions.

Source

<u>Volume</u>

6. Please describe any diversions of watercourses:

7. Are there any changes planned in the solid waste disposal facilities?

____ No ____Yes

If yes, attach a copy of the plan or indicate changes and include an implementation schedule.

Include excerpt from MACA Capital Plan if available.

Other

1. Describe any additional details on the existing municipal facilities which should be considered by the Nunavut Water Board during it review.