



## NWB Tools

Ida Porter <ida.porter@nwb-oen.ca>

**[Licensing] FW: 3BM-IGL1520**

Cynthia Ene <cynthia.ene@nwb-oen.ca>

Fri, Oct 16, 2015 at 4:33 PM

To: Licensing Department <licensing@nwb-oen.ca>

Can you please make a pdf of the email communication below from Bhabesh and also merge the email in pdf with the 3 attached spill documents into one big pdf doc, call it "Preliminary Spill Contingency Plan".

I'd like to have it uploaded to the application folder on the ftp site for 3BM-IGL1520,

## Thanks



**Cynthia Ene, MBA, P.Eng.- ٧٩٢٤ ٤٤٨٥**

**Technical Advisor - Conseillère Technique**

[illegible]

**NUNAVUT WATER BOARD - OFFICE DES EAUX DU NUNAVUT**

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 Merci de penser à l'environnement avant d'imprimer ce courriel / Thank you for thinking of the environment before printing this email

----- Forwarded message -----

From: Roy, Bhabesh <BRoy@gov.nu.ca>

Date: Mon, Aug 17, 2015 at 6:29 PM

Subject: RE: FW: FW: 3BM-IGL1520

To: Cynthia Ene <[cynthia.ene@nwb-oen.ca](mailto:cynthia.ene@nwb-oen.ca)>

**Cynthia**

I mean Hamlet follows the guidelines and the Form for spill reporting in order to satisfy spill contingency plan. This is the standard procedure Hamlet follows for any type of spills. Please find attached the reporting form and guidelines for spill reporting. Please consider these attached documents as the part of the O&M procedure of Igloolik raw sewage treatment by Lagoons which was mailed to you earlier.

If you have any further question, I am available to talk to you during this week. I am now in Sanikiluaq with AANDC inspector.

Thanks.

Bhabesh

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**From:** Cynthia Ene [[cynthia.ene@nwb-oen.ca](mailto:cynthia.ene@nwb-oen.ca)]

**Sent:** August 17, 2015 11:31 AM

**To:** Roy, Bhabesh

**Subject:** Re: FW: FW: 3BM-IGL1520

Thank you Bhabesh for the submission, I believe the aim is for compliance with the Licence Terms, as requested by AANDC.

In this recent submission you state that:

*Hamlet follows Spill Contingency Plan. Hamlet SAO is the contact if any spill happens in the Community. SAO along with the Hamlet Foreman fills the spill reporting form and either e-mail or fax to Spill hot line. They clean up the spill using the standard procedure and report to AANDC and NWB on monthly basis until Cleanup work is complete.*

Can you please provide this Spill Contingency Plan (SCP) that you have mentioned the Hamlet has. I believe the SCP will detail the contact information that the operators have for the SAO, in the event of a spill. It should also contain a spill reporting form, with the contact information of the spill hot line, and the standard procedures use for spill clean up.

Thank you,

On Sun, Aug 16, 2015 at 6:07 PM, Roy, Bhabesh <[BRoy@gov.nu.ca](mailto:BRoy@gov.nu.ca)> wrote:

Cynthia,

As we discussed.

Hope this will satisfy you.

Thanks.

Bhabesh

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**From:** Cynthia Ene [[cynthia.ene@nwb-oen.ca](mailto:cynthia.ene@nwb-oen.ca)]

**Sent:** August 12, 2015 5:53 PM

**To:** Roy, Bhabesh

**Subject:** Re: FW: FW: 3BM-IGL1520

Good Afternoon Bhabesh, I called earlier in the day and was unable to reach you. Please call me back at your earliest convenience, my cell phone number as usual is **867 983 5173**.

Thanks,

On Wed, Aug 12, 2015 at 2:23 PM, Roy, Bhabesh <[BRoy@gov.nu.ca](mailto:BRoy@gov.nu.ca)> wrote:

Hi Cynthia

I am now in Kimmirut with AANDC Water Resopurce Officer Justin Hack. You may call here **867 939 2247** and ask for me.

Thanks.

Bhabesh

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**From:** Cynthia Ene [[cynthia.ene@nwb-oen.ca](mailto:cynthia.ene@nwb-oen.ca)]

**Sent:** August 11, 2015 10:43 AM

**To:** Roy, Bhabesh

**Subject:** Re: FW: FW: 3BM-IGL1520

Good Morning Bhabesh, I still have some questions on the responses you have provided. I am free to call you around 2pm your time in Iqaluit, please let me know if that is a good time for you and what number I can reach you at.

Thank you,

Cynthia

[Quoted text hidden]

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**3 attachments**

 **Spill -1.doc**  
173K

 **Spill-2.pdf**  
38K

 **Spill-3.pdf**  
419K

## Instructions for Completing the NT-NU Spill Report Form

This form can be filled out electronically and e-mailed as an attachment to [spills@gov.nt.ca](mailto:spills@gov.nt.ca). Until further notice, please verify receipt of e-mail transmissions with a follow-up telephone call to the spill line. Forms can also be printed and faxed to the spill line at 867-873-6924. Spills can still be phoned in by calling collect at 867-920-8130.

<b>A. Report Date/Time</b>	The actual date and time that the spill was reported to the spill line. If the spill is phoned in, the Spill Line will fill this out. <b>Please do not fill in the Report Number:</b> the spill line will assign a number after the spill is reported.
<b>B. Occurrence Date/Time</b>	Indicate, to the best of your knowledge, the exact date and time that the spill occurred. Not to be confused with the report date and time (see above).
<b>C. Land Use Permit Number /Water Licence Number</b>	This only needs to be filled in if the activity has been licenced by the Nunavut Water Board and/or if a Land Use Permit has been issued. Applies primarily to mines and mineral exploration sites.
<b>D. Geographic Place Name</b>	In most cases, this will be the name of the city or town in which the spill occurred. For remote locations – outside of human habitations – identify the most prominent geographic feature, such as a lake or mountain and/or the distance and direction from the nearest population center. <b>You must include the geographic coordinates</b> (Refer to Section E).
<b>E. Geographic Coordinates</b>	This only needs to be filled out if the spill occurred outside of an established community such as a mine site. Please note that the location should be stated in degrees, minutes and seconds of Latitude and Longitude.
<b>F. Responsible Party Or Vessel Name</b>	This is the person who was in management/control/ownership of the substance at the time that it was spilled. In the case of a spill from a ship/vessel, include the name of the ship/vessel. Please include full address, telephone number and e-mail. Use box K if there is insufficient space. <b>Please note that, the owner of the spilled substance is ultimately responsible for any spills of that substance, regardless of who may have actually caused the spill.</b>
<b>G. Contractor Involved?</b>	Were there any other parties/contractors involved? An example would be a construction company who is undertaking work on behalf of the owner of the spilled substance and who may have contributed to, or directly caused the spill and/or is responding to the spill.
<b>H. Product Spilled</b>	Identify the product spilled; most commonly, it is gasoline, diesel fuel or sewage. For other substances, avoid trade names. Wherever possible, use the chemical name of the substance and further, identify the product using the four digit UN number (eg: UN1203 for gasoline; UN1202 for diesel fuel; UN1863 for Jet A & B)
<b>I. Spill Source</b>	Identify the source of the spill: truck, ship, home heating fuel tank and, if known, the cause (eg: fuel tank overflow, leaking tank; ship ran aground; traffic accident, vandalism, storm, etc.). Provide an estimate of the extent of the contaminated/impacted area (eg: 10 m <sup>2</sup> )
<b>J. Factors Affecting Spill</b>	Any factors which might make it difficult to clean up the spill: rough terrain, bad weather, remote location, lack of equipment. Do you require advice and/or assistance with the cleanup operation? Identify any hazards to persons, property or environment: for example, a gasoline spill beside a daycare centre would pose a safety hazard to children. Use box K if there is insufficient space.
<b>K. Additional Information</b>	Provide any additional, pertinent details about the spill, such as any peculiar/unique hazards associated with the spilled material. State what action is being taken towards cleaning up the spill; disposal of spilled material; notification of affected parties. If necessary, append additional sheets to the spill report. Number the pages in the same format found in the lower right hand corner of the spill form: eg. "Page 1 of 2", "Page 2 of 2" etc. <b>Please number the pages to ensure that recipients can be certain that they received all pertinent documents.</b> If only the spill report form was filled out, number the form as "Page 1 of 1".
<b>L. Reported to Spill Line by</b>	Include your full name, employer, contact number and the location from which you are reporting the spill. Use box K if there is insufficient space.
<b>M. Alternate Contact</b>	Identify any alternate contacts. This information assists regulatory agencies to obtain additional information if they cannot reach the individual who reported the spill.
<b>N. Report Line Use Only</b>	<b>Leave Blank.</b> This box is for the <b>Spill Line's</b> use only.



Canada

# NT-NU SPILL REPORT

OIL, GASOLINE, CHEMICALS AND OTHER HAZARDOUS MATERIALS

NT-NU 24-HOUR SPILL REPORT LINE

TEL: (867) 920-8130

FAX: (867) 873-6924

EMAIL: spills@gov.nt.ca

**REPORT LINE USE ONLY**

<b>A</b>	REPORT DATE: MONTH – DAY – YEAR		REPORT TIME		<input type="checkbox"/> ORIGINAL SPILL REPORT, OR <input type="checkbox"/> UPDATE # TO THE ORIGINAL SPILL REPORT	REPORT NUMBER -	
<b>B</b>	OCCURRENCE DATE: MONTH – DAY – YEAR		OCCURRENCE TIME				
<b>C</b>	LAND USE PERMIT NUMBER (IF APPLICABLE)			WATER LICENCE NUMBER (IF APPLICABLE)			
<b>D</b>	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM THE NAMED LOCATION				REGION <input type="checkbox"/> NWT <input type="checkbox"/> NUNAVUT <input type="checkbox"/> ADJACENT JURISDICTION OR		
<b>E</b>	LATITUDE DEGREES      MINUTES      SECONDS			LONGITUDE DEGREES      MINUTES      SECONDS			
<b>F</b>	RESPONSIBLE PARTY OR VESSEL NAME		RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION				
<b>G</b>	ANY CONTRACTOR INVOLVED		CONTRACTOR ADDRESS OR OFFICE LOCATION				
<b>H</b>	PRODUCT SPILLED		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES			U.N. NUMBER	
	SECOND PRODUCT SPILLED (IF APPLICABLE)		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES			U.N. NUMBER	
<b>I</b>	SPILL SOURCE		SPILL CAUSE		AREA OF CONTAMINATION IN SQUARE METRES		
<b>J</b>	FACTORS AFFECTING SPILL OR RECOVERY		DESCRIBE ANY ASSISTANCE REQUIRED		HAZARDS TO PERSONS, PROPERTY OR ENVIRONMENT		
<b>K</b>	ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS						
<b>L</b>	REPORTED TO SPILL LINE BY	POSITION	EMPLOYER	LOCATION CALLING FROM	TELEPHONE		
<b>M</b>	ANY ALTERNATE CONTACT	POSITION	EMPLOYER	ALTERNATE CONTACT LOCATION	ALTERNATE TELEPHONE		
<b>REPORT LINE USE ONLY</b>							
<b>N</b>	RECEIVED AT SPILL LINE BY	POSITION Station operator	EMPLOYER	LOCATION CALLED Yellowknife, NT	REPORT LINE NUMBER (867) 920-8130		
LEAD AGENCY <input type="checkbox"/> EC <input type="checkbox"/> CCG <input type="checkbox"/> GNWT <input type="checkbox"/> GN <input type="checkbox"/> ILA <input type="checkbox"/> INAC <input type="checkbox"/> NEB <input type="checkbox"/> TC			SIGNIFICANCE <input type="checkbox"/> MINOR <input type="checkbox"/> MAJOR <input type="checkbox"/> UNKNOWN		FILE STATUS <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED		
AGENCY		CONTACT NAME		CONTACT TIME	REMARKS		
LEAD AGENCY							
FIRST SUPPORT AGENCY							
SECOND SUPPORT AGENCY							
THIRD SUPPORT AGENCY							



Canada

# NT-NU SPILL REPORT

OIL, GASOLINE, CHEMICALS AND OTHER HAZARDOUS MATERIALS

NT-NU 24-HOUR SPILL REPORT LINE

TEL: (867) 920-8130

FAX: (867) 873-6924

EMAIL: spills@gov.nt.ca

REPORT LINE USE ONLY

A	REPORT DATE: MONTH – DAY – YEAR			REPORT TIME		<input type="checkbox"/> ORIGINAL SPILL REPORT, OR <input type="checkbox"/> UPDATE # _____ TO THE ORIGINAL SPILL REPORT	REPORT NUMBER _____
	OCCURRENCE DATE: MONTH – DAY – YEAR			OCCURRENCE TIME			
C	LAND USE PERMIT NUMBER (IF APPLICABLE)				WATER LICENCE NUMBER (IF APPLICABLE)		
D	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM NAMED LOCATION				REGION		
					<input type="checkbox"/> NWT <input type="checkbox"/> NUNAVUT <input type="checkbox"/> ADJACENT JURISDICTION OR OCEAN		
E	LATITUDE			LONGITUDE			
	DEGREES	MINUTES	SECONDS	DEGREES	MINUTES	SECONDS	
F	RESPONSIBLE PARTY OR VESSEL NAME			RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION			
G	ANY CONTRACTOR INVOLVED			CONTRACTOR ADDRESS OR OFFICE LOCATION			
H	PRODUCT SPILLED			QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES		U.N. NUMBER	
	SECOND PRODUCT SPILLED (IF APPLICABLE)			QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES		U.N. NUMBER	
I	SPILL SOURCE			SPILL CAUSE		AREA OF CONTAMINATION IN SQUARE METRES	
J	FACTORS AFFECTING SPILL OR RECOVERY			DESCRIBE ANY ASSISTANCE REQUIRED		HAZARDS TO PERSONS, PROPERTY OR ENVIRONMENT	
K	ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS						
L	REPORTED TO SPILL LINE BY	POSITION	EMPLOYER	LOCATION CALLING FROM	TELEPHONE		
	ANY ALTERNATE CONTACT	POSITION	EMPLOYER	ALTERNATE CONTACT LOCATION	ALTERNATE TELEPHONE		
REPORT LINE USE ONLY							
N	RECEIVED AT SPILL LINE BY	POSITION	EMPLOYER	LOCATION CALLED	REPORT LINE NUMBER		
		STATION OPERATOR		YELLOWKNIFE, NT	(867) 920-8130		
LEAD AGENCY <input type="checkbox"/> EC <input type="checkbox"/> CCG <input type="checkbox"/> GNWT <input type="checkbox"/> GN <input type="checkbox"/> ILA <input type="checkbox"/> INAC <input type="checkbox"/> NEB <input type="checkbox"/> TC				SIGNIFICANCE <input type="checkbox"/> MINOR <input type="checkbox"/> MAJOR <input type="checkbox"/> UNKNOWN		FILE STATUS <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED	
AGENCY		CONTACT NAME		CONTACT TIME		REMARKS	
LEAD AGENCY							
FIRST SUPPORT AGENCY							
SECOND SUPPORT AGENCY							
THIRD SUPPORT AGENCY							