



P.O. Box 119
GJOA HAVEN, NT X0E 1J0
TEL: (867) 360-6338
FAX: (867) 360-6369

ᐃᐅᐅᐅᐅ ᐃᐅᐅᐅᐅᐅ ᐅᐅᐅᐅᐅᐅ
NUNAVUT WATER BOARD
NUNAVUT IMALIRIYIN KATIMAYINGI

WATER LICENCE APPLICATION FORM

INTERVAL	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Application for: (check one)

☐ New

☐ Amendment

☒ Renewal

☐ Assignment

LICENCE NO:

(for NWB use only)

nwb3cam

1. NAME AND MAILING ADDRESS OF
APPLICANT/LICENSEE

Hamlet of Cambridge Bay
P.O.Box #16
Cambridge Bay, NU
X0E 0C0

Phone: 867-983-2337

Fax: 867-983-2193

e-mail: elwjohn@polarnet.ca

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

Nunavut Water
Board

Phone:

Fax:

e-mail:

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

Latitude: 69° 07N

Longitude: 105° 03 W

NTS Map No. Scale

4. DESCRIPTION OF UNDERTAKING (attach plans and drawings)

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):

6. **WATER USE**

- ☒ To obtain water
☐ 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)

57,000,000 Million Litres per year

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Sewage | <input type="checkbox"/> Waste oil |
| <input checked="" type="checkbox"/> Solid Waste | <input type="checkbox"/> Greywater |
| <input type="checkbox"/> Hazardous | <input type="checkbox"/> Sludges |
| <input checked="" 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

☐ Yes ☐ No If no, date expected _____

Regional Inuit Association

☐ Yes ☐ No If no, date expected _____

Commissioner

☐ Yes ☐ No If no, date expected _____

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

NIRB Screening

☐ Yes ☐ No If no, date expected _____

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

N/A

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

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 _____

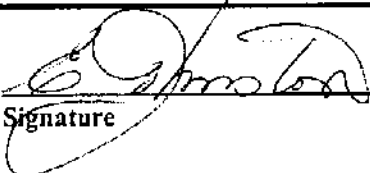
Application fee \$30.00 (c/o of Receiver General for Canada) ☐ Yes ☐ No If no, date expected _____

14. PROPOSED TIME SCHEDULE

☐ Annual (or) ☒ Multi Year

Start Date: July 1st, 2000 Completion Date: _____

Elwood Johnston S.A.O.
Name (Print) Title (Print)

 April 19
Signature Date 2000

For Nunavut Water Board use only

APPLICATION FEE

Amount: \$ _____ Receipt No.: _____

WATER USE DEPOSIT

Amount: \$ _____ Receipt No.: _____