



Municipality of Kimmirut

Box 120, Kimmirut, NT X0A 0N0

Ph. (819) 939-2247 Fx. (819) 939-2045

May 23rd, 2001

File No. NWB341m

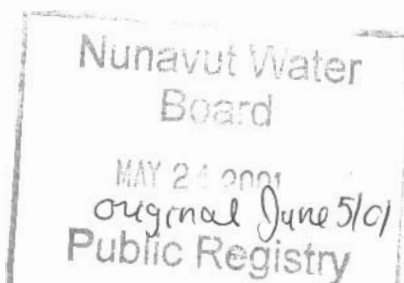
Nunavut Water Board
Gjoa Haven, NU
X0B 1J0

Re: Water Licence N5L4-1441

Attn: Rita Becker

The Municipality of Kimmirut has to obtain water from Lake Fundo for our community water needs and the water would be discharged at our present sewage lagoon. Please process our water licence renewal. This would be a renewal from April 1st, 2001 to March 31st 2002.

Thank you for your time and attention.




INTERNAL	
PC	1 L
LA	Maya
OM	
TA	
BS	
ED	
CEO	
BRD	

ለኃላፊዎች: ለፖርቱጋል ለሰላም ምክር ቤቱ N5L4-1441

$$\mathcal{D}^{\mathfrak{g}^b} \mathcal{D}^{\mathfrak{g}^b}: \mathfrak{h} \subset \mathfrak{d}^{\mathfrak{g}}$$
[illegible]

Q. d⁵ r^b Δb ∇P^a a ∇A^c.

Sincerely,

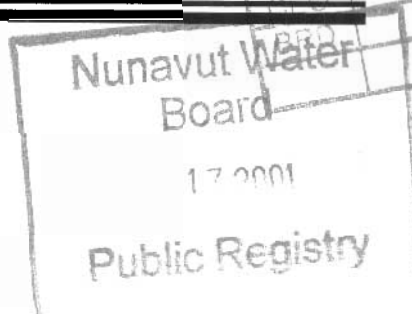

 Tommy Akavak
 A/SAO



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

ᐃᐱᐅᐅᐅ ᐃᐱᐅᐅᐅ ᐅᐱᐱᐅᐅᐅ
NUNAVUT WATER BOARD
NUNAVUT IMALIRIYIN

INTERNAL	
PC	
LA	may 17/01
CM	
TA	
ES	
ED	
STO	
ABD	



WATER LICENCE APPLICATION FORM

Application for: (check one)

☐ New ☐ Amendment ☒ Renewal ☐ Assignment

→ 1154-1441

LICENCE NO:
(for NWB use only)

1. NAME AND MAILING ADDRESS OF
APPLICANT/LICENSEE

Municipality of Kimmirut
Kimmirut, NT
X0A-0N0

Phone: (867) 939-2247
Fax: (867) 939-2045
e-mail: _____

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

N/A

Phone: _____
Fax: _____
e-mail: _____

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

Latitude: 62°50'45N Longitude: 69°52'09 NTS Map No. _____ Scale _____

4. DESCRIPTION OF UNDERTAKING (attach plans and drawings)

Municipal water & waste disposal

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

- | | |
|---------------------------------------------------------------------|--------------------------------------------------|
| <input checked="" type="checkbox"/> To obtain water | <input type="checkbox"/> To divert a watercourse |
| <input type="checkbox"/> To modify the bed or bank of a watercourse | <input type="checkbox"/> Flood control |
| <input type="checkbox"/> To alter the flow of, or store, water | <input type="checkbox"/> Other (describe): _____ |
| <input type="checkbox"/> To cross a watercourse | |

7. QUANTITY OF WATER INVOLVED (litres per second, litres per day or cubic metres per year, including both quantity to be used and quantity to be returned to source)

65,783 litres per day (estimated)
60,000 litres per day returned to source (estimated)

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

- | | |
|-------------------------------------------------------------|--------------------------------------------------|
| <input checked="" type="checkbox"/> Sewage | <input checked="" type="checkbox"/> Waste oil |
| <input checked="" type="checkbox"/> Solid Waste | <input checked="" 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	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____
Regional Inuit Association	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____
Commissioner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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. 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?

11. (Continued)

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)

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

Environmental Health Officer's report

14. 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 _____

15. PROPOSED TIME SCHEDULE

☐ Annual (or) ☒ Multi Year

Start Date: Jan. 1/01 Completion Date: Dec. 31/05

Name (Print)

Title (Print)

Signature

Date

For Nunavut Water Board use only

APPLICATION FEE

Amount: \$ _____

Receipt No.: _____

WATER USE DEPOSIT

Amount: \$ _____

Receipt No.: _____