



P.O. Box 119

GJOA HAVEN, NT X0E 1J0

TEL: (867) 360-6338

FAX: (867) 360-6369

kNK5 wmoEp5 vtmpq

NUNAVUT WATER BOARD

NUNAVUT IMALIRIYIN KATIMAYINGI

---

**Water Licence Application  
Supplementary Questionnaire  
for Municipalities**

**I. GENERAL**

{tc "I. GENERAL • ADVANCE \\x 396 •  
"}  
"

1. Date: **29 June 2006**
2. Applicant: **Municipality of Kugluktuk (Kitikmeot Region)**
3. Contacts: **Mayor Derrick Power  
Hamlet of Kugluktuk  
P/O Box 271  
Qikiqtarjuaq, Nunavut X0B 0E0  
Ph: (867) 982-6500  
Fax: (867) 982-3060**
4. Community Status: ☐ Village ☐ Town ☐ City  
☒ Hamlet ☐ Settlement Corporation
5. Indicate the status of the municipality's licence on the date of the application.  
☐ New Application  
☒ Renewal - Water Licence # **NWBKUG0308 (Amendment)**

**II. ATTACHMENTS{tc "**

## II. ATTACHMENTS"

1. Attach 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;
  - d. sewage treatment facilities (lagoon, honey bag pit, wetland);
  - e. wastewater treatment area and discharge outlets;
  - f. solid waste disposal areas and drainage patterns;
  - g. hazardous waste disposal area;
  - h. transportation access routes;
  - i. existing water bodies/courses and any changes to these water bodies/courses that have or may 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 maps attached? ☒ Yes ☐ No

**(Detailed Design Report, Full Size Detailed Design Drawings)**

If no, please indicate when they will be available.

Indicate which organization has provided the various maps or diagrams.

**Nuna Burnside Engineering and Environmental Ltd.**

### III. WATER SUPPLY

**Water Source – N/A – This amendment application does not involve any changes to the water supply portion of the existing licence.**

1. Type of source: ☐ Lake ☐ River ☐ Well ☐ Other \_\_\_\_\_

2. Name of water source and alternative, if any.

\_\_\_\_\_  
Primary Source

\_\_\_\_\_  
Secondary Source

3. Usual break-up & freeze-up period: \_\_\_\_\_  
Break-up Freeze-up

#### **Water Intake – N/A**

1. Please provide short descriptions for the following:

- a. Freshwater intake facility
- b. Operating capacity of pumps used
- c. Intake screen size

#### **Water Storage – N/A**

1. Type of water storage facility. (check where applicable)

☐ Reservoir/Pond ☐ Storage tank ☐ None

☐ Other \_\_\_\_\_ Description:

2. If “reservoir” checked:

Is the reservoir lined? ☐ Yes ☐ No

What type of liner?

When was it installed?

#### **Water Treatment – N/A**

1. Indicate the quality of the water.

Summer:	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
Fall:	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
Winter:	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
Spring:	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

2. Describe.

3. Type of water treatment (proposed).

- ☐ Filtration and chlorination  
☐ Chlorination only  
☐ None  
☐ Other \_\_\_\_\_  
 Description \_\_\_\_\_

**Water Use And Distribution – N/A**

1. Volume of water use:

Distribution	Estimated number of people on the system <b>A</b>	Estimated average water consumption (Litres/capita/day) <b>B</b>	Total water consumption (Litres/day) <b>A x B</b>
<b>TOTAL</b>			

**General Condition of the Water Supply Facilities**

1. General 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.

**Modifications**

1. Are there any changes *planned* for the water supply system?      ☐ No      ☐ Yes

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

2. Does the community believe changes needed to the water supply, storage or treatment facilities? Describe.

**Identification**

Are there signs identifying drinking water sources presently used by the municipality? ☐ Yes ☐ No

#### IV. SEWAGE DISPOSAL

{tc "

Are there signs identifying drinking water sources presently used by the municipality ?

No Yes

#### IV. SEWAGE DISPOSAL

"}

1. What type(s) of sewage treatment does the community have?

- ☒ Lagoon
- ☐ Mechanical system
- ☒ Wetland
- ☐ Honey bag
- ☐ Combination/Other: describe

##### *Lagoon (if applicable)*

1. Have there been any operating problems with the lagoon? ☒ Yes ☐ No  
If yes, describe

**The existing lagoon system does not provide any holding time or controlled discharge not sized to meet long term needs. The facility requires expansion to meet 20 year population projections, which is proposal under consideration (Please refer to the Detailed Design Report attached).**

##### *Mechanical System (if applicable) – N/A*

1. Describe (type, specifications, operation and maintenance program for the mechanical wastewater treatment system).
2. Are sludges produced ? ☐ Yes ☐ No  
If yes, describe how the sludges are disposed of:

##### *Wetland (if applicable)*

1. Describe the Wetland wastewater treatment system.

**The amendment to the License includes the provision of a Wetland Treatment Facility, which has been designed to produce an effluent fully compliant with Section 36(3) of the *Fisheries Act*. Anticipated effluent quality (as determined by the Alberta Wetland Model, corrected for temperature parameters) will be below 45 mg/L for both BOD and TSS. Ammonia levels are anticipated to be below those required by Environment Canada to be non-acutely-lethal to fish.**

##### *Honey Bag Pit*

1. Does the municipality use a honey bag pit?  
☐ Yes ☒ No

If yes, describe the location, drainage, and operation/maintenance of the site:

**Old pit will be closed as part of the construction of the new facility.**

### ***Commercial, Industrial and/or Hazardous Wastes***

1. Are there any sources of commercial or industrial *liquid* waste being discharged or deposited to the wastewater treatment system that may affect the quality of the effluent or leachate produced? (*The municipality should be aware that any commercial or industrial discharge has to be approved by the municipality*)    \_\_\_ Yes    **X** No

If yes, indicate sources, types and quantities.

### ***Sewage Discharge***

1. Are fish, shell fish and other wildlife harvested in or near the discharge area ?  
\_\_\_ Yes    **X** No

If yes, indicate species harvested, and level of harvest.

### ***General Condition of the sewage treatment facilities***

1. General condition of the:

- a. Sewage collection system                      **X** Satisfactory    \_\_\_ Unsatisfactory

If unsatisfactory, explain.

- b. Discharge control system                      \_\_\_ Satisfactory    **X** Unsatisfactory

If unsatisfactory, explain.

Inadequate retention of sewage in lagoon and point discharge to environment does not provide adequate assimilation of effluent.

- c. Dams, diversion dykes, berms                      \_\_\_ Satisfactory    **X** Unsatisfactory

If unsatisfactory, explain.

**Lagoon berm does not provide retention time.**

### ***Modifications***

1. Are there any changes *planned* in the sewage treatment facilities?                      \_\_\_ No    **X** Yes  
If yes, please attach a copy of the plan, or describe changes. Provide information on the implementation schedule.

**The facility requires expansion to meet 20 year population projections, which is the proposal under consideration (see Detailed Design Report). Upgrades will include an engineered expansion to the existing Wetland Treatment Facility, which has been designed to produce final effluent that will be compliant with Section 36(3) of the *Fisheries Act*. Anticipated effluent quality (as determined by the Alberta Wetland Model, corrected for temperature parameters) will be below 45 mg/L for both BOD and TSS. Ammonia levels @ < 10 mg/L are anticipated to be below those required by Environment Canada to be non-acutely-lethal to fish (Please refer to Detailed Design Report).**

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

**Yes, the project is supported by the Hamlet. The Detailed Design Report recommendations have been adopted by the Hamlet.**

### ***Abandonment and Restoration***

1. List and describe abandoned or restored sewage treatment facilities.  
Refer to original attachment maps.

**The existing sewage lagoon and adjacent abandoned Honey Bay pit will be abandoned and closed once the new system is constructed. Closure will consist of bull dozing the berms into the pit and contouring to match the surrounding topography.**

### ***Identification***

Are there signs identifying past and present sewage disposal sites?      ☒ Yes    \_\_\_ No

## **V. SOLID WASTE DISPOSAL**

1. Briefly describe how solid wastes are collected and delivered to the disposal area.

**Solid waste is regularly collected by Hamlet staff. Bulky metals and hazardous waste materials are segregated. Municipal solid waste is burned in a burn pit and compacted in the landfill.**

2. Is the solid waste site fenced?      ☒ Yes    \_\_\_ No

3. Is the fence adequate?      \_\_\_ Yes    ☒ No

If no, describe

**The existing fence is adequate for the current fill area but not adequate for the expansion. The fence will be replaced with a new higher fence during the proposed upgrades. Berms will be added to the Solid Waste Disposal Facility, to prevent off-site water impacts (Please refer to the Detailed Design Report attached).**

### ***Waste Reduction***

1. Does the municipality burn garbage ?      ☒ Yes    \_\_\_ No  
If yes, describe how and when this is done.

**Municipal solid waste is placed in a pit and burned on a regular basis before being compacted in the fill area.**

2. Has the municipality considered measures for waste reduction such as recycling or reuse?  
☒ Yes    \_\_\_ No

If yes, describe

**Active re-use of vehicle, heavy equipment and snowmobile parts occurs at the bulky Metals Disposal Area.**

### ***Animal Carcasses Pit***

1. Does the municipality have an area for the disposal of animal carcasses ? ☐ Yes ☒ No  
If yes, describe the location, drainage and operation/maintenance of the site.

**Carcases are part of the municipal waste stream.**

### ***Waste Oil Pit***

1. Describe the waste oil storage area?

**The existing Waste Oil and Hazardous Material Storage Area is lined, bermed and located in the same area as the proposed sewage lagoon. A new lined and bermed area capable of storing 30 m<sup>3</sup> of hazardous waste is proposed. See the Detailed Design Report.**

### ***Bulky Scrap Metal Waste Disposal Area***

1. Does the municipality have a scrap metal or bulky waste disposal area? ☒ Yes ☐ No  
If yes, briefly describe its location and operation plan.

**The Bulky Metals Disposal Area is operated adjacent to the Solid Waste Disposal Facility. Bulky Metals made available for re-use by community members, until such point as it is deemed no longer useable. A disposal well for bulky metals is proposed (Please refer to the Detailed Design Report attached).**

### ***Commercial, Industrial and/or Hazardous Wastes Disposal Area***

1. Are there any commercial or industrial waste being discharged or deposited in the solid waste disposal area? (The municipality should be aware that any discharge of commercial or industrial waste has to be approved by the municipality) ☐ Yes ☒ No  
If yes, please indicate sources, types and quantity.

2. Will the municipality use a hazardous waste disposal area? ☒ Yes ☐ No  
If yes, describe its:

- a. Location **A lined area inside the waste disposal site.  
Please refer to the Detailed Design Report attached.**
- b. Structure **A lined area inside the waste disposal site.  
Please refer to the Detailed Design Report attached.**
- c. Operation and maintenance (describe special handling/disposal methods for these wastes)

**Please refer to Operations and Maintenance Manuals in the Detailed Design Report attached.**

### ***General Condition of the Solid Waste Disposal Area***

1. Comment on the general conditions of the:
- a. Solid waste disposal area ☐ Satisfactory ☒ Unsatisfactory

If unsatisfactory, explain.

**The existing facility does not have a hazardous waste storage area and the fill area is approaching capacity. A new larger facility with upgraded berms and fencing is proposed. The site will include a hazardous waste depot and land farm area. (Please refer to the Detailed Design Report attached).**

### ***Modifications***

1. Are there any changes planned for the solid waste disposal area?

☐ No ☒ Yes

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

**Refer to Detailed Design Report.**

2. Are changes needed to the solid waste disposal area? Describe.

**Please refer to the Detailed Design Report attached.**

### ***Abandonment and Restoration***

1. List and describe abandoned or restored solid waste facilities.  
Indicate their location on a map.

**Not applicable. No facilities will be abandoned during the proposed upgrades. The existing site will be within the footprint of the proposed expansion.**

### ***Identification***

1. Are there signs identifying past and present solid waste disposal sites?

☒ Yes ☐ No

## **VI. INSPECTION AND MONITORING**

1. When were municipal facilities inspected by?

☒ Indian and Northern Affairs Inspector Date: **See Reports attached.**

☒ Municipal and Community Affairs Date: **August, 2003**

☒ Other: **(Nuna Burnside inspected sewage and solid waste facilities)** Date: **October 2005**

2. Is there a system in place for reporting spills? ☒ Yes ☐ No  
If yes, describe.

**The Hamlet/Senior Administrative Officer (SAO) or designate reports all spills to the 24 hr Nunavut Spill Report Line. (Refer to the Environmental Emergency Contingency Plan attached in the supporting documentation.)**

3. Is there a contingency plan for clean up of spills? ☒ Yes ☐ No  
If yes, describe.

**Please refer to the attached Environmental Spill Contingency Plan located in the Appendices of the Detailed Design Report.**

4. Have any spills occurred in the past five years? ☐ Yes ☒ No

If yes, describe and show on a map the locations of the spills. What action has been taken to clean the affected areas?

{tc "Identification

Are there signs identifying past and present solid waste disposal sites ?

No Yes

## VI. INSPECTION AND MONITORING

1. When were municipal facilities inspected by:

Indian and Northern Affairs Inspector Date:

Municipal and Community Affairs Date:

Other: Date:

2. Is there a system in place for reporting spills?

Yes No

If yes, describe.

3. Is there a contingency plan for clean up of spills?

Yes No

If yes, describe.

4. Have any spills occurred"

**Monitoring Program**{tc "

**Monitoring Program"**}

1. Is water sampling and analysis done? ☒ Yes ☐ No

If Yes, answer the questions a to e

- a. Briefly describe how samples are taken and sent to the laboratory.

**See Reports attached.**

b. Briefly describe any monitoring done for wastewater effluent and leachate.

c. Who is responsible for water sampling ?

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Fax # : \_\_\_\_\_

Level of training: \_\_\_\_\_

d. Recognized laboratory performing analysis of samples.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

e. Are any changes planned in the water quality monitoring program? ☒ Yes \_\_\_ No  
If yes, describe.

**Please refer to the attached Monitoring Plan located in the Appendices of the Detailed Design Report, which will be implemented by the Hamlet in the summer of 2007.**

## VII. PUBLIC 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 those concerns.

**Please refer to the Detailed Design Report attached.**

## VIII. PUBLIC HEALTH

*(Help may be obtained from the Regional Environmental Health Officer if you have difficulty with this section.)*

1. Date: **July 5, 2006**
2. Municipality: **Hamlet of Kugluktuk**
3. Contact: (Environmental Health Officer Contact)

Telephone #: (867) 982-4531

Fax #: (867) 982-3115

4. Have there been any problems or health/environmental concerns with drinking water?  
☐ Yes ☒ No

If yes, describe.

**Not part of our project scope to evaluate.**

5. Have there been any problems or health/environmental concerns with sewage disposal/treatment?  
☒ Yes ☐ No

If yes, describe

**Lagoon berms allow immediate discharge of sewage with little or no retention time.**

6. Have there been any problems or health/environmental concerns with solid waste disposal?  
☐ Yes ☒ No

If yes, describe.

**Waste batteries and waste oil are stockpiled in the open with no plan for disposal. The existing landfill is approaching capacity**

### ***Monitoring Program***

1. Does the Regional Health Board perform water quality sampling? ☐ Yes ☐ No *N/A*

If Yes, answer questions (a) to (e)

- a. Briefly describe the sampling methodology.
- b. Briefly describe any monitoring of wastewater effluent and leachate.

**No sampling is currently undertaken by the Hamlet. Water license compliance sampling is undertaken by Indian and Northern Affairs Canada (INAC).**

- c. Who is responsible for sampling?

Name: **Jim Rogers**  
Position: **Manager, Water Resources**  
Telephone #: **(867) 975-4555**  
Fax #: **(867) 975-4585**  
Level of training:

- d. Recognized laboratory performing analysis of samples.

Name: **Taiga Environmental Laboratory**  
Address: **4601 - 52nd Avenue P.O. Box 1500**  
**Yellowknife, Northwest Territories X1A 2R3**  
Telephone #: **(867) 669-2781**  
Fax #: **(867) 669-2718**

- e. Are any changes planned in the water quality monitoring program? ☒ Yes \_\_\_No  
If yes, describe.

**Please refer to attached Monitoring Plan located within the Appendices of the Detailed Design Report for the proposed water quality monitoring program, which will implemented by the Hamlet in the Summer of 2006.**

## **IX. TECHNICAL INFORMATION**

*(Assistance may be obtained from the Regional Community Government (CG&T) office if you have difficulty with this section).*

- 1. Date: **July 5, 2006**
- 2. Municipality: **Hamlet of Kugluktuk**
- 3. Contact: **Paul Wayne (SAO @ Hamlet of Kugluktuk)**  
**867-982-6500**  
**867-982-3060**
- 4. Population (according to most recent census results): **1585**

5. Estimated growth rate over next 5 years:

**Please refer to Detailed Design Report attached.**

6. Have any baseline data collection and evaluation been undertaken with respect to the physical, biological, and chemical characteristics of the main water bodies in the area? ☒ Yes ☐ No

If yes, provide a summary of program details or site title, authors, cities, and dates:

**Please refer to the Detailed Design Report attached.**

If no, are such studies being planned? ☐ No ☐ Yes (If yes, when and by whom):

7. Have Elders been consulted in the collection of baseline data on main water bodies in the area? ☐ No ☒ Yes

If yes, specify.

**Community meetings and Hamlet Council has been consulted during all phases of the project to date.**

8. Have any baseline data collection and evaluation been undertaken with respect to the various biophysical components of the environment potentially affected by the project? ☐ No ☒ Yes

If yes, provide details below.

**Please refer to Detailed Design Report attached.**

If no, are such studies being planned? ☐ No ☐ Yes.

If yes, specify:

### ***Attachments***

1. Attach detailed plan or drawing(s) of the present *solid waste disposal area*. Include the following information:
  - 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



Vegetation – Grasses, heather, mosses, sedges and lichens grow on limited soils. Willow and alder thickets grow in the wetland areas.

Soil – Talus and deltaic deposits, breakdown of dolerite into sand and gravel

3. Channel characteristics:

Is the course of any channel changed? \_\_\_\_ Yes **X** No

If yes, describe measures to maintain stream bed and bank stability.

4. Will the cross-section of any watercourse be changed? \_\_\_\_ Yes **X** No

If yes, describe the change and its effect on the flow capacity of the channel.

**Water Supply – N/A (Not part of project scope)**

1. What is the rate of withdrawal from the source?

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 – N/A**

1. Please provide short descriptions of the following:

a. freshwater intake facility

b. operating capacity of the pumps

c. intake screen size

**Water Storage – N/A**

1. Is a dam or dyke being used to store or alter the flow of water? \_\_\_\_ Yes \_\_\_\_No

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 watercourse?

☐ Yes ☐ No

If yes, what is the storage capacity and surface area of the reservoir?

m<sup>3</sup>  ha.

4. Will the dam or dyke affect fish migration or movement ? ☐ Yes ☐ No

If yes, describe all measures for compensation of fish habitat lost due to the dam or dyke, and mitigation for fish migration or movement.

***Water Treatment – N/A***

1. Indicate the capacity of the treatment facility.
2. What is the capacity of the water storage facility?
3. Describe the method of water treatment (i.e., backwash, flocculation, sedimentation, chemicals used), and provide the results of the most recent bacteriological and chemical analysis. Attach a diagram, if possible.
4. Are there any changes planned in the water treatment 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.

***Sewage Disposal***

1. Indicate the level of sewage treatment:  
☐ primary ☒ secondary ☐ tertiary  
Pre-treatment (if applicable): ☐ screening ☐ maceration  
Lagoons (if applicable): ☐ anaerobic ☐ aerobic ☒ facultative
2. Indicate the capacity of the sewage treatment facility.

**See attached reports.**

3. Based on current population projections, the facility will meet the needs of the community until the year 2026, ***following proposed upgrades.***
4. Average depth of the wastewater lagoon? **4 m.**
5. What is the design freeboard? **1 m.**

6. Indicate the retention time of the sewage while in the treatment facility\_\_\_\_\_ days.

**Retention time is variable dependent upon when the sewage is dumped into the lagoon and when annual discharge of effluent begins.**

7. Indicate the estimated rate of discharge of wastewater < 650 m<sup>3</sup>/d

8. Indicate the location of the discharge point.

**Please refer to Detailed Design Drawings attached.**

9. Is the discharge: ☒ seasonal \_\_\_\_continuous  
If the discharge is seasonal, during what month(s) is it done? **May to August**  
What is the duration of the discharge (days/weeks/months)? **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.

Include excerpt from MACA Capital Plan if available.

**Please refer to the Detailed Design Report attached.**

#### ***Solid Waste Disposal***

1. Indicate the capacity of the disposal area **83,055** m<sup>3</sup>.

**Please refer to Detailed Design Report attached.**

2. The *average* depth of the solid waste disposal site \_\_\_\_\_ m.

**See Detailed Design Report and Sealed Design Drawings attached.**

3. The current facility will meet community needs until the year **2026, following the implementation of the proposed upgrades.**
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?

**Not Applicable. There are no proposed diversions of natural watercourses.**

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

<u>Source</u>	<u>Volume</u>
---------------	---------------

6. Please describe any diversions of watercourses:

**Not Applicable. There are no proposed diversions of natural watercourses.**

7. Are there any changes planned in the solid waste disposal facilities? \_\_\_\_ No **X** 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.

**Please refer to the Detailed Design Report attached.**

***Other***

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

**Not Applicable.**