

P.O. Box 119 GJOA HAVEN, NU XOB 1JO TEL: (867) 360-6338 FAX: (867) 360-6369 אביי אברהי החביי NUNAVUT IMALIRIYIN KATIMAYINGI NUNAVUT WATER BOARD OFFICE DES EAUX DU NUNAVUT

WATER LICENCE APPLICATION FORM

Application for	or: (check one)							
☐ New	$oxed{oxed}$ Renewal	☐ Amend	ment	Assignment				
LICENCE NO: (for NWB use only)								
	AND MAILING ADDI CANT/LICENSEE	RESS OF	2.	ADDRESS OF COR CANADA (if applica	RPORATE OFFICE IN able)			
The Hamlet of W P.O. Box 120 Whale Cove, Nur XOC 0J0			N/A Phone: Fax: e-mail:					
Phone: <u>(867) 896</u> Fax: <u>(867) 896</u> e-mail:								
 LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the Undertaking) Latitude: (62°10' "N) Longitude: (92°36' "W) NTS Map Sheet No. 55 K/2 Scale: 1:50000 								
4. DESCRIPTION OF UNDERTAKING (attach plans and drawings) see attached additional information.								
5. TYPE OF PRIMARY UNDERTAKING (A supplementary questionnaire <u>must</u> be submitted with the application for undertakings listed in "bold")								
☐ Min	ustrial ning and Milling(include nicipal (includes camps/l ver		ing)	Agricultural Conservation Recreational Miscellaneous (d	escribe below):			
See Schedule II of Northwest Territories Waters Regulations for Description of Undertakings								

6.	WATER USE							
	☐ To obtain water ☐ Flood control							
	☐ To cross a watercourse ☐ To divert a watercourse							
	To modify the bed or bank of a watercourse To alter the flow of, or store, water							
L_	Other (describe):							
7.	QUANTITY OF WATER INVOLVED (cubic metres per day including both quantity to be used and							
	quality to be returned to source)							
	Water use ⊠ 100m³/day or less							
	Greater than 100m³/day; if greater, indicate quantities to be used for each purpose (camp,							
	drilling, etc.)							
	Water returned to source							
	m³/day							
8.	WASTE (for each type of waste describe: composition, quantity (cubic metres per day), methods of							
	treatment and disposal, etc.)							
	∑ Sewage							
	Solid Waste							
	☐ Hazardous ☐ Sludges ☐ Other describe)							
	☑ Bulky Items/Scrap Metal ☐ Other describe):							
9.	OTHER PERSONS OR PROPERTIES AFFECTED BY THIS UNDERTAKING (give name, mailing							
	address and location; attach if necessary)							
	Land Use Permit DIAND							
	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.)							
see	e attached additional information.							
	NIRB Screening Yes No If no, date expected							
11	TAILUT WATER DICUTE							
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?							
	No							
	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 CLID CONTRACTORS (non	- Ll and Lunctions)						
None CONTRACTORS	AND SUB-CONTRACTORS (nam	ie, address and functions)						
76								
	RTAKEN TO DATE (list and attach	copies of studies, reports, research	ch, etc.)					
see attached additional inforr	see attached additional information.							
	IG DOCUMENTS <u>MUST</u> BE INCI PROCESS TO BEGIN	LUDED WITH THE APPLICA	TION FOR THE					
Supplementary Questionnair	re (where applicable: see section 5)	Yes No If no, date ex	rpected					
Inuktitut and/or Inuinnaqtun/	/English Summary of Project	Yes No If no, date ex	spected					
Application fee of \$30.00 (P	Payee Receiver General for Canada)	☐ Yes ☐ No If no, date ex	spected					
	less otherwise indicated in Section 9	of the NWT Waters Regulations;	Payee Receiver					
General for Canada)		Yes No If no, date e	xpected					
	E SCHEDULE (unless otherwise ind	dicated, the NWB will consider the	he application for					
a five (5) year term)	one year or less (or)	Multi Year						
	Start Date: 2009Completion I	Date: <u>2014</u>						
Clayton Croucher	Senior Administrative Officer							
Name (Print)	Title (Print)	Signature	Date					
For Nunavut Water Board off	fice use only							
APPLICATION FEE	Amount: \$ Pay ID No.	.:						
WATER USE DEPOSIT	WATER USE DEPOSIT Amount: \$ Pay ID No.:							