

SCHEDULE II

Department of Indian and Northern Affairs

TER, FORESTS AND LAND DIVISION

APPLICATION FOR LICENCE, AMENDMENT OF LICENCE OR RENEWAL OF LICENCE

NOTE: if insufficient space, attach sheets



1. Name & Mailing Address Hamlet of Tuktoyaktuk P.O. Box 120 Tuktoyaktuk, N.W.T.	2. Address of Head Office in Canada if incorporated
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3. LOCATION OF UNDERTAKING - describe and attach map naming river, creek, lake, spring or ground water reservoir

- Summer - Lake east of M.O.T. Airport Runway
- Winter - Kugmallit Bay

4. NATURE OF UNDERTAKING - describe and attach plans

5. PURPOSE OF UNDERTAKING a) To obtain water <input checked="" type="checkbox"/> b) To divert water <input type="checkbox"/> c) To store water <input type="checkbox"/> d) To alter the flow of water <input type="checkbox"/> e) To return the flow of water <input type="checkbox"/> f) Other (specify) <input type="checkbox"/>	6. WATER USE CLASSIFICATION a) Agriculture <input type="checkbox"/> b) Conservation <input type="checkbox"/> c) Industrial <input type="checkbox"/> d) Municipal <input checked="" type="checkbox"/> e) Power <input type="checkbox"/> f) River Engineering <input type="checkbox"/> g) Storage <input type="checkbox"/> h) Recreation <input type="checkbox"/>
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7. QUANTITY OF WATER INVOLVED - (cubic feet per second, gallons per day, acre feet per year) 130,000	8. QUALITY OF RETURNED WATER a) Unaltered b) Altered (specify) Chlorination
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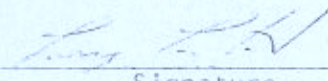
9. OTHER PROPERTIES AFFECTED BY THIS UNDERTAKING - describe location and list owners

None.

10. CONTRACTORS AND SUBCONTRACTORS

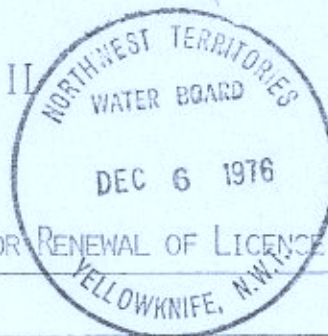
Names & Addresses	Functions
E. Gruben's Transport P.O. Box 177, Tuktoyaktuk, N.W.T.	Pick-up & Deliver Water

11. TIME SCHEDULE PROPOSED Start: Completion:	12. FEES Application Water Use Total \$ \$ \$
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 Signature	Secretary Manager Title	November 29, 1976 Date
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APPLICATION FEE: Amount _____ Receipt No. _____ Date _____	WATER USE FEES: Amount _____ Receipt No. _____ Date _____	APPLICATION Approved by: _____ 19	Filed in Water Use Register: 19
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FOR OFFICE USE ONLY

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