



SCHEDULE C
(Subsection 5(1))

APPLICATION FOR LICENCE, AMENDMENT OF LICENCE, OR RENEWAL OF LICENCE

APPLICATION NO: NTL3-1619
(amendment or renewal only)

1. NAME AND MAILING ADDRESS OF APPLICANT

HanLef of Paubhatuk
Box 98
Paubhatuk NT X0E 1N0

TELEPHONE: 867-580-3531 FAX: 867-920-3703

2. ADDRESS OF HEAD OFFICE IN CANADA IF INCORPORATED

Same as above

TELEPHONE: _____ FAX: _____

3. LOCATION OF UNDERTAKING

Latitude: 69° 21' N Longitude: 124° 04' W

4. DESCRIPTION OF UNDERTAKING (describe and attach plans)

See plans attached

5. TYPE OF UNDERTAKING

- | | | | |
|----------------|-------------------------------------|-----------------------------|-------|
| 1. Industrial | _____ | 2. Mining and Milling | _____ |
| 3. Municipal | <input checked="" type="checkbox"/> | 4. Power | _____ |
| 5. Agriculture | _____ | 6. Conservation | _____ |
| 7. Recreation | _____ | 8. Miscellaneous (describe) | _____ |

6. WATER USE

- To obtain water
- _____ Flood control
- _____ To cross a watercourse
- _____ To divert water
- _____ To modify the base or bank of a watercourse
- _____ To alter the flow, or store, water

Other (describe)

7. QUALITY 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)

12000 cu metres per year

8. WASTE DEPOSITED (quantity, quality, treatment and disposal)

12000 cu metres per year

**9. OTHER PERSONS PROPERTIES AFFECTED BY THIS UNDERAKING
(give names, mailing address and location; attach list if necessary)**

10. PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION

11. CONTRACTOR AND SUB-CONTRACTORS (names, addresses and functions)

12. STUDIES UNDERTAKEN TO DATE (attach list if necessary)

13. PROPOSED TIME SCHEDULE

Start date: Dec 11 2015

Completion date: April 1 2020

NAME: Greg Morris L
(print)

TITLE: Supervisor
(print)

SIGNATURE: _____

DATE: Oct 17 2015

FOR IWB OFFICE USE ONLY

APPLICATION FEE Amount: \$ _____

Receipt #: _____

WATER USE DEPOSIT Amount: \$ _____

Receipt #: _____