**SCHEDULE III**

**(Subsection 6(1) of the Northwest Territories Water Regulations)**

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

APPLICATION/LICENCE NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Amendment or Renewal only)

# NAME AND MAILING ADDRESS OF APPLICANT

|  |  |
| --- | --- |
| Applicant’s Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mailing Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Community | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Prov/Terr | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# ADDRESS OF HEAD OFFICE IN CANADA IF INCORPORATED

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| Mailing Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Community | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Prov/Terr | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# LOCATION OF UNDERTAKING

(Describe and attach a map, indicating watercourses and location of any proposed waste deposits)

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Longitude \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Latitude \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# DESCRIPTION OF UNDERTAKING

(Describe and attach plans)

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# TYPES OF UNDERTAKING

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# WATER USE

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# QUANTITY 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)

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# WASTE DEPOSITED

(Quantity, quality, treatment and disposal)

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# OTHER PERSONS OR PROPERTIES AFFECTED BY THIS UNDERTAKING

(Give name, mailing address and location; attach list if necessary)

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# PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION

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# CONTRACTOR AND SUB-CONTRACTORS

(Names, addresses and functions)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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# STUDIES UNDERTAKEN TO DATE

(Attach list if necessary)

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# PROPOSED TIME SCHEDULE

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| --- | --- | --- |
| Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_ |
| Name (Print) | Title (Print) |  |
|  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_ |
| Signature    ***FOR OFFICE USE ONLY*** | Date |  |
| Application Fee Amount: $ | Receipt No.: |  |
| Water Use Deposit Amount: $ | Receipt No.: |  |

(Please make all cheques payable to the Receiver General)