

From: [Jacqueline Ho](#)
To: [Julian Morse](#)
Cc: [Permits](#)
Subject: FW: Pine Point Mining Limited Spill Reports
Date: August 14, 2018 8:46:16 AM
Attachments: [Pine Point Mining Spill Report 2018_003.pdf](#)
[Pine Point Mining Spill Report 2018_004.pdf](#)

See attached.



Jacqueline Ann Ho, MSc
Regulatory Specialist
Mackenzie Valley Land and Water Board
(867) 766 7465
jho@mvlwb.com | www.mvlwb.com

Please note: All correspondence to the Board, including emails, letters, faxes and attachments are public documents and may be posted to the public registry.

From: Stanley Clemmer <sclemmer@pinepointmining.com>
Sent: Monday, August 13, 2018 4:38 PM
To: spills@gov.nt.ca
Cc: Mike Vassal (mike_vassal@gov.nt.ca) <mike_vassal@gov.nt.ca>; Wendy Bidwell (wendy_bidwell@gov.nt.ca) <wendy_bidwell@gov.nt.ca>; Jacqueline Ho <jho@mvlwb.com>; John Key <jkey@pinepointmining.com>; Robin Adair <radair@osiskometals.com>; 'Norman McCowan (norman_mccowan@gov.nt.ca)' <norman_mccowan@gov.nt.ca>; Judy Dudley <jdudley@pinepointmining.com>; Martin King <mking@pinepointmining.com>
Subject: Pine Point Mining Limited Spill Reports

Dear Sir or Madam:

Please find attached documentation of two minor spills at Pine Point where Pine Point Mining Limited is carrying out a diamond drill program under land use permit MV2018C0005 and water permit MV2018L2-0003.

Stanley Clemmer
Chief Geologist
Pine Point Mining Limited
Suite 300
1100 Ave. des Canadiens de Montreal
Montreal, QC
H3B 2S2

905-616-5090

NT-NU SPILL REPORT

OIL, GASOLINE, CHEMICALS AND
OTHER HAZARDOUS MATERIALS



NT-NU 24-HOUR SPILL REPORT LINE

Tel: (867) 920-8130 • Fax: (867) 873-6924 • Email: spills@gov.nt.ca

REPORT LINE USE ONLY

A	Report Date: MM DD YY	Report Time:	<input type="checkbox"/> Original Spill Report OR <input type="checkbox"/> Update # _____ to the Original Spill Report		Report Number:
	Occurrence Date: MM DD YY	Occurrence Time:			
C	Land Use Permit Number (if applicable):		Water Licence Number (if applicable):		
D	Geographic Place Name or Distance and Direction from the Named Location:			Region: <input type="checkbox"/> NT <input type="checkbox"/> Nunavut <input type="checkbox"/> Adjacent Jurisdiction or Ocean	
E	Latitude: _____ Degrees _____ Minutes _____ Seconds		Longitude: _____ Degrees _____ Minutes _____ Seconds		
F	Responsible Party or Vessel Name:		Responsible Party Address or Office Location:		
G	Any Contractor Involved:		Contractor Address or Office Location:		
H	Product Spilled: <input type="checkbox"/> Potential Spill	Quantity in Litres, Kilograms or Cubic Metres:	U.N. Number:		
I	Spill Source:	Spill Cause:	Area of Contamination in Square Metres:		
J	Factors Affecting Spill or Recovery:	Describe Any Assistance Required:	Hazards to Persons, Property or Environment:		
K	Additional Information, Comments, Actions Proposed or Taken to Contain, Recover or Dispose of Spilled Product and Contaminated Materials:				
L	Reported to Spill Line by:	Position:	Employer:	Location Calling From:	Telephone:
M	Any Alternate Contact:	Position:	Employer:	Alternate Contact Location:	Alternate Telephone:

REPORT LINE USE ONLY

N	Received at Spill Line by:	Position:	Employer:	Location Called:	Report Line Number:
Lead Agency: <input type="checkbox"/> EC <input type="checkbox"/> CCG/TCMSS <input type="checkbox"/> GNWT <input type="checkbox"/> GN <input type="checkbox"/> ILA <input type="checkbox"/> AANDC <input type="checkbox"/> NEB <input type="checkbox"/> Other: _____			Significance: <input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> Unknown		File Status: <input type="checkbox"/> Open <input type="checkbox"/> Closed
Agency:	Contact Name:	Contact Time:	Remarks:		
Lead Agency:					
First Support Agency:					
Second Support Agency:					
Third Support Agency:					

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M	Any Alternate Contact:	Position:	Employer:	Alternate Contact Location:	Alternate Telephone:

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Agency:		Contact Name:	Contact Time:	Remarks:	
Lead Agency:					
First Support Agency:					
Second Support Agency:					
Third Support Agency:					