



**Sahtu Land and Water Board**  
PO Box 1, Fort Good Hope, NT. X0E 0H0

☎ 867-598-2413  
📠 867-598-2325  
🌐 slwb.com

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

APPLICATION/LICENCE NO: S17B-001

(Amendment or Renewal only)

**1. NAME AND MAILING ADDRESS OF APPLICANT**

Applicant's Name Great Bear Lake Lodge LTD  
Mailing Address 950 BRADFORD ST.  
Community WINNIPEG  
Prov/Terr MB Postal Code R3H 0N5  
Telephone 204 774 5775 Fax (204) 783 2320  
Email chuk@plummerslodges.com Other Fish@plummerslodges.com

**2. ADDRESS OF HEAD OFFICE IN CANADA IF INCORPORATED**

Mailing Address SAME AS ABOVE  
Community \_\_\_\_\_  
Prov/Terr \_\_\_\_\_ Postal Code \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**3. LOCATION OF UNDERTAKING**

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

Maps in waste management plan.

Longitude 66° 42' 30" N

Latitude 119° 41' 00" W

**4. DESCRIPTION OF UNDERTAKING**

(Describe and attach plans)

The water system supplies water to a fishing lodge that accommodates a maximum of 80 people (staff included). The attached description and diagrams outline the operation of the system and location of its components

**5. TYPES OF UNDERTAKING**

Industrial

**6. WATER USE**

Other (describe)

to obtain water

**7. 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)

Estimated @ 75 gal/day per person. (1700 m<sup>3</sup> annually)  
All water is returned through the sewage system

**8. WASTE DEPOSITED**

(Quantity, quality, treatment and disposal)

see attached Waste Management Plan

**9. OTHER PERSONS OR PROPERTIES AFFECTED BY THIS UNDERTAKING**

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

None

**10. PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION**

see attached spill plan

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

NONE

**12. STUDIES UNDERTAKEN TO DATE**  
(Attach list if necessary)

**13. PROPOSED TIME SCHEDULE**

This system has been in place for many years.

Start Date:


N/A

Completion Date:

N/A

CHUK COULTER  
Name (Print)

MANAGER  
Title (Print)

  
Signature

MARCH 6 / 2019  
Date

**FOR OFFICE USE ONLY**

Application Fee Amount: \_\_\_\_\_

Receipt No.: \_\_\_\_\_

Water Use Deposit Amount: \_\_\_\_\_

Receipt No.: \_\_\_\_\_

(Please make all cheques payable to the Receiver General for Canada)