



0714-2
WB
MACA

MUNICIPAL WATER USE INSPECTION FORM

DATE: SEPTEMBER 16, 1997 COMPANY REP: ELSA KOMIEHK - SAO
 LICENSEE: HAMLET OF TURTOYARTUK LICENCE #: N3L3-0714

WATER SUPPLY

Source (s): KUDALAK LAKE Quantity Used (to date): UNKNOWN
 Owner/Operator: HAMLET (estimate or actual)

Indicate: **A - Acceptable** **U - Unacceptable** **N/A - Not Applicable**
 Intake Facilities: A Storage Structure A Treatment Systems A Chem. Storage A
 Flow Meas. Device A Convey. Lines N/A Pumping Stations A

Comments: NOTE: PRIOR TO INSPECTION LICENSEE HAD NO SCREEN AT KUDALAK LAKE. SCREEN PUT ON AT TIME OF INSPECTION. TREATMENT PLANT NEAT + TIDY.
HAMLET FILLING RESERVOIR AT TIME OF INSPECTION.

WASTE DISPOSAL

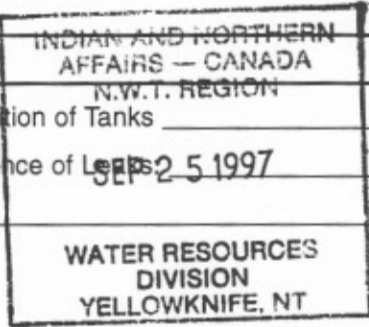
Sewage Sewage Treatment System (primary, secondary or tertiary) PRIMARY
 Natural Water body ✓ Continuous Discharge (land or water) NO
 Seasonal Discharge ✓ Wetlands Treatment N/A Trench NO
 Solid Waste: Owner/Operator: HAMLET
 Landfill ✓ Burn & Landfill ✓ Other _____

Indicate: **A - Acceptable** **U - Unacceptable** **N/A - Not Applicable**
 Disch. Quality A ^{SEWAGE LAGOON} Decant Structure A Erosion SOME ON DUMP BERM
 Disch. Meas. Dev. A Dyke Inspection A Seepages NONE
 Dams, Dykes A Freeboard A Spills NONE REPORTED
 Construcion N/A O & M Plan UNDER REVIEW A & R Plan N/A

Periods of Discharge: FALL Effluent Discharge Rate: ≈ 300m³/hr
 Comments: O+M Plan just received and being reviewed. NO BAGGED SEWAGE PIT.
HAMLET started cleaning sewage lagoon today. No problems noted.

FUEL STORAGE

Owner: N/A Operator N/A Condition of Tanks _____
 Berms & Liners N/A Water within berm: _____ Evidence of Leaks SEP 25 1997
 Drainage Pipes N/A Pump Station and Catchment Berm _____
 Pipeline Condition _____ Not Applicable: _____



SURVEILLANCE NETWORK PROGRAM

Samples Collected: (Hamlet) SNP 714-2 prior to decant.
(DIAND) SNP 714-1; SNP 714-2; and SNP 714-3.
 Signs Posted: SNP SNP 714-2 and 714-3 NOT POSTED Warning NO
 Record & Reporting 1996 ANNUAL REPORT INCOMPLETE.

Geotechnical Inspection: N/A
 Non-Compliance of Act or Licence: VIOLATIONS: 1. Part H item 1: O+M Plan - 2 months
2. Part C, item 3: NO INTAKE SCREEN PRIOR TO INSPECTION.
3. Part B item 5+6: NO SEWAGE LAGOON SIGN NOR SNP 714-2 and 714-3.

5. Part D item 7: NO BAGGED SEWAGE PIT. 4. Part B item 1: ANNUAL REPORT INCOMPLETE. Page 2 attached Yes _____ No X

Licensee Representatives Title: [Signature]
 Licensee Representatives Signature: [Signature]
 Inspectors Name: [Signature]
 Inspectors Signature: [Signature]

