



**GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
DEPARTMENT OF ENVIRONMENT AND CLIMATE CHANGE**

APPLICATION FOR THE PROTECTION OF A PUBLIC WATER SUPPLY

TO: Minister
Department of Environment and Climate Change

Under Section 39(1) of the *Water Resources Act*, SNL 2002 cW-4.01, it is requested that the water supply area known as _____

be designated as a *Protected Public Water Supply Area* for the community _____

It is understood that the information provided herein is required for the assessment of the need for protection of the above noted water supply area. Additional information will be provided as required by the Minister and/or his/her officials.

A. LOCATION

Provide the following information on a 1:50,000 scale topographic map:

1. map number and scale,
2. location of intake,
3. watershed boundary,
4. any access roads,
5. municipal and planning boundaries, and
6. any other relevant information

B. DRAINAGE BASIN

1. Name of the source of water supply:
2. List major streams and ponds which drain into the source:
3. Total area of the watershed: _____ km²
4. Land cover:

Forest	_____	%
Barren	_____	%
Wetland	_____	%
Developed	_____	%

C. WATER SUPPLY

1. Is a public water supply system currently in place? Yes ☐ No ☐
2. Is the public water supply system currently in use? Yes ☐ No ☐
3. What date was the public water supply system installed? _____
4. Who was the Consultant for the public water supply system? _____
5. Is the Consultant's report available? Yes ☐ No ☐
6. What is the total population served by the water supply? _____
7. Community _____ Population Served
Community _____ Population Served
8. Will there be any industrial users of the water supply? Yes ☐ No ☐
9. Who are the industrial users? _____
10. What is the total water demand for municipal and industrial uses?
Municipal _____ L/day
Industrial _____ L/day

D. WATER QUALITY

1. Has periodic bacteriological analysis been done by the Department of Government Services and Lands or any other agency?

Yes ☐ No ☐
2. Has routine physical and chemical analyses or other water quality tests been done?

Yes ☐ No ☐
3. Provide copies of any laboratory reports/results that may be available.

E. LAND AND WATER USE

1. Provide available data and information on the existing and potential resource development activities. Locate on the map.

a) Recreational activities/facilities:

Swimming/boating	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Fishing	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Cabins	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Any other	Please specify: _____	

b) Urban/suburban development:

Residential	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Commercial	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Industrial	Yes <input type="radio"/> No <input type="radio"/>	Location: _____

c) Agricultural operations:

Yes ☐ No ☐

Please specify type(s) and location(s): _____

d) Mining activities:

Pits and quarries	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Mineral exploration	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Mining	Yes <input type="radio"/> No <input type="radio"/>	Location: _____

e) Forestry operations:

Commercial	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Domestic	Yes <input type="radio"/> No <input type="radio"/>	Location: _____

f) Transportation facilities and other linear developments:

Air (airport, float plane, etc.)	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Roads		
Paved	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Gravel	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Trails	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Utility Lines		
Above ground	Yes <input type="radio"/> No <input type="radio"/>	Location: _____
Below ground	Yes <input type="radio"/> No <input type="radio"/>	Location: _____

g) Any other land and water use activities having impact on water quality.

h) Other physical feature and man-made alterations.

2. Provide a detailed account of any land and water related activities which are creating and/or have potential to cause impairment of the quality of the water for domestic or other uses.

F. OTHER INFORMATION

Provide any other data, test results or information that may support your request for the designation of this water supply as a *Protected Public Water Supply Area*. This information may be in the form of:

1. engineering studies,
2. previous watershed designation studies,
3. municipal plans,
4. existing water related problems such as flooding, erosion, siltation, water pollution, etc.,
5. municipal by-laws, and
6. any other relevant information.

G. APPLICATION INFORMATION

Please mail completed form along with all maps, plans and specifications to the appropriate regional office:

1. Applicant's name (please print):	_____
2. On behalf of community:	_____ _____
3. Telephone number(s):	_____ (work) _____ (home)
4. Fax number:	_____
5. Complete Mailing Address:	_____ _____ _____
7. Email address:	_____
8. Date:	_____
9. Signature:	_____

Please mail completed form along with all maps, plans and specifications to the appropriate regional office:

Eastern Region

Department of Environment and Climate Change
Water Resources Management Division
Confederation Building, West Block
Drinking Water Section
PO Box 8700
St. John's NL A1B 4J6
Tel: (709) 729-4817
Tel: (709) 729-7634
Fax: (709) 729-0320

Western and Labrador Region

Department of Environment and Climate Change
Water Resources Management Division
Sir Richard Squires Building
PO Box 2006
Corner Brook NL A2H 6J8
Tel: (709) 637-2542
Fax: (709) 637-2541

Central Region

Department of Environment and Climate Change
Water Resources Management Division
Provincial Building
3 Cromer Avenue
Grand Falls Windsor NL A2A 1W9
Tel: (709) 292-4280
Fax: (709) 292-4365

Wellhead Protected Water Supply Areas

Department of Environment and Climate Change
Water Resources Management Division
Confederation Building, West Block
Groundwater Resources Section
PO Box 8700
St. John's NL A1B 4J6
Tel: (709) 729-1671
Tel: (709) 729-2539
Fax: (709) 729-0320

Application Fee Schedule

In accordance with Section 21 of the *Executive Council Act*, the following application fee(s) must be paid to obtain a Designation Notice under Section 39 of the *Water Resources Act, SNL 2002 cW-4.01*.

Designation Notice for the protection of a public water supply area.....\$400 + HST
Request for Amendment \$100 + HST

The above fees must accompany each separate application for designation or request for amendment and the fee is non-refundable. Please enclose your cheque or money order made out to the *Newfoundland Exchequer Account* or attach a cashier's receipt for the correct amount. **The application cannot be reviewed until payment in full has been received.**

This section must be completed so that a receipt can be issued.

Applicant's Name (Please Print) _____

Applicant's Address _____

Estimated Project Cost _____

Type of Project: _____ Fee: \$_____ + HST: \$_____ Total Enclosed
\$_____

For Department's Use Only Account # 01-1221-500-4150-2800-000000 ENV-Water Rights (H)

Payment Enclosed: _____ **Verified by:** _____ **Date:** _____ **Receipt #** _____

HST Registration No: 107442683