

For office use only	
Date Received	Permit No.

## CANADIAN WILDLIFE SERVICE PERMIT APPLICATION

### NOTE TO RESEARCHERS

Without exception, all research within the NWT and Nunavut must be licensed. This includes work in indigenous knowledge as well as in physical, social, and biological sciences. For information on licensing for your project within the NWT, please refer to the Aurora Research Institute's Web site at <http://www.nwtresearch.com>. For Nunavut, visit the Nunavut Research Institute Web site at <http://www.nri.nu.ca>.

**For Scientific Permits:** Prior to issuing a Scientific Permit to Take, Salvage or Disturb Migratory Birds, CWS requires a copy of either an NWT or Nunavut Wildlife Research Permit; or an Aurora Research Permit/Nunavut Research Permit. Include a copy of either permit with this application or forward a copy to CWS upon receipt of it, or your CWS permit will not be issued.

**Nunavut:** In Nunavut your project will have to undergo screening by the Nunavut Impact Review Board. One of their requirements is that you obtain a conformity report from the Nunavut Planning Commission. Please ensure that you have done so.

### To be completed by all applicants:

<input checked="" type="checkbox"/> New application <input type="checkbox"/> Amendment/extension of existing permit Existing permit no.
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<b>Type of permit applied for:</b> <input checked="" type="checkbox"/> Bird Sanctuary permit <input type="checkbox"/> National Wildlife Area entry permit <input type="checkbox"/> Scientific permit to take salvage or disturb migratory birds
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<b>Territory:</b> <input type="checkbox"/> NWT <input checked="" type="checkbox"/> Nunavut
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<b>Period of permit requested:</b> <input checked="" type="checkbox"/> 1 year <input type="checkbox"/> 2 year <input type="checkbox"/> 3 year
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<b>Anticipated project start date:</b> August 2018 <b>Anticipated project end date:</b>
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<b>Please indicate by checkbox if your project is receiving federal government funding:</b> <input type="checkbox"/> No <input type="checkbox"/> Polar Continental Shelf Project <input checked="" type="checkbox"/> Yes/Other (please list)
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<b>Please indicate by checkbox if your project requires approvals/permits by any of the following regulators:</b> <input type="checkbox"/> DFO <input type="checkbox"/> NRCAN <input type="checkbox"/> INAC <input type="checkbox"/> Parks Canada <input type="checkbox"/> NWT or Nunavut Water Board <input type="checkbox"/> NEB
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**1. CONTACT INFORMATION**

<b>Applicant name and mailing address</b> Jacob Barkley, Area Supervisor, Integrated Technical Services, Canadian Coast Guard 28 Waubeek St.   28 Rue Waubeek Parry Sound, Ontario, P2A 1B9		<b>Fax</b>
		<b>Phone</b> 705-746-2196,X-214
<b>Field supervisor</b> Commanding Officer, CCGS Sir Wilfred Laurier	<b>E-mail address</b> 'CCGS Sir Wilfrid Laurier - Commanding Officer' <LaurierCO@swl.ccg- ngcc.gc.ca>	<b>Phone</b>

Total number of personnel covered by application:

**2. SUMMARY PROJECT INFORMATION**

**Project title:**

Mulroak Island, Coast Guard tower removal.

**Project objective: (concise statement of purpose and goals)**

Decommissioning of Coast Guard Aid to Navigation site by removal of tower.

**Project description: (non-technical summary; 300 words or less; describe purpose, nature and occasion of all activities; include the anticipated intensity of vehicle use)**

The intent of this work is to remove a 30' ( 9.2m) tall tripod aluminum tower which is used as an aid to navigation (See" Appendix A" attached for history of structure, pictures of structure and maintenance records).

The tower will be dismantled by the crew of the CCGS 'Sir Wilfrid Laurier', using the vessel as a platform and a CCG Helicopter which will deploy personeel and meterials between the vessel and the island. NOTE: the vessel will not enter into the wildlife protected area.

All materials will be removed from the island.

*NOTE: A full project description should accompany this application.*

**Activities related to project proposal: (check as many as apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Scientific research        | <input type="checkbox"/> Ground surveys      | <input type="checkbox"/> Storage of fuel     |
| <input type="checkbox"/> Tourism, non-commercial    | <input type="checkbox"/> Aerial surveys      | <input type="checkbox"/> Camp construction   |
| <input type="checkbox"/> Tourism, commercial        | <input type="checkbox"/> Winter road         | <input type="checkbox"/> Use of firearms     |
| <input checked="" type="checkbox"/> Use of boats    | <input type="checkbox"/> Commercial harvest  | <input type="checkbox"/> Use of explosives   |
| <input checked="" type="checkbox"/> Use of aircraft | <input type="checkbox"/> Cruise ship         | <input type="checkbox"/> Seismic exploration |
| <input type="checkbox"/> Use of off-road vehicles   | <input type="checkbox"/> Drilling activities | <input type="checkbox"/> Mining activities   |
| <input type="checkbox"/> Other (please specify):    |  |  |

**Are you applying to kill, salvage or otherwise interfere with migratory birds (e.g. take blood, transmitter implant, etc.)?**

Yes       No

If yes, provide details, including specie(s) of bird, number and method. Indicate whether the approval of an animal care committee has been received and include the name of the committee.

**Do you plan to carry firearms?**

Yes       No

If yes, please describe number, type and purpose of firearms.

Remington 700 shotgun with slugs. Safety.

**3. PROJECT LOCATION**

**Geographic place names and coordinates: (be as specific as possible; enter multiple coordinates for activities occurring over large area(s))**

Location	Geographic Coordinates
Mulroak Island, Queen Maud Gulf, NU.	67 57 18 N 102 40 00 W

**NOTE:** A map document delineating activity centres and travel corridors, etc. is required and should accompany this application. Please submit shapefiles if available.

Status of land upon which project will occur:

- Federal crown
- Inuit-owned or other private
- Territorial (commissioner's land)

#### 4. OPERATIONAL AND ENVIRONMENTAL CONSIDERATIONS

**Provide a summary of potential environmental impacts and proposed restoration plans and activities: (describe the effects of the proposed activities on land, water, flora, fauna; attach separate pages as necessary)**

Nil impact to land and water is anticipated.

**List of equipment and fuel to be used: (include aircraft, vehicles, boats, generators, large tent structures, various types of fuel, etc; indicate proposed containment strategies for all fuels; attach separate pages as necessary)**

Equipment / Fuel	Size / Amount	Proposed use / Containment
Helicopter	Bell 429	Transport crew, equipment and materials
Helicopter Fuel	500 L	Helicopter Operation

**NOTE:** Please submit a copy of a spill contingency plan, if available, with this application.

**Waste disposal: (describe any wastes that may be produced, e.g. garbage, grey water, sewage, hazardous waste, and proposed disposal methods; attach separate pages as necessary)**

Type of waste	Approx. amount produced	Proposed disposal method
Tower material		Coast Guard ship/helo will remove

### 5. POTENTIAL ADVERSE EFFECTS TO SPECIES AT RISK

**PLEASE NOTE:**

- You should consider species at risk legally listed on the Species at Risk Act (i.e. on Schedule 1) and those under consideration for legal listing, such as those designated by the Committee on the Status of Endangered Wildlife in Canada (COSEWIC).
- Refer to species status reports and other information on the Species at Risk Registry at [www.sararegistry.gc.ca](http://www.sararegistry.gc.ca) for information on specific species.

**Identify Species at Risk found within your proposed project area.**

Peregrine Falcon,  
Red Knot (rufa subspecies)

Barren-ground Caribou (Dolphin and Union population)

**List any potential adverse effects that your project may have on the species, its habitat and/or its residence. All direct, indirect and cumulative effects should be considered.**

None are anticipated.

If birds are found to be nesting on the tower, the project will be deferred to a future year.

If birds are found to be nesting on the island (as previously occurred, during 2007 site visit when Arctic Tern nest was observed) care will be taken to ensure it is not disturbed in any way.

**If potential adverse effects are identified, list mitigation to avoid or lessen those effects.**

N/A

**List monitoring measures to determine the effectiveness of mitigation and/or identify where further mitigation is required.**

### 6. CONSULTATION

List local community representatives who have been contacted about your proposed activities: (include community groups, local businesses, schools, etc.; state how they are participating in your activity, if at all (e.g. providing advice, supplying goods, hired to assist you, etc.))

1. Representative name:  
 Name of group represented:  
 Address / phone / fax:  
 How contacted and date:  
 Participating?  Yes  No  
 If yes, how?

2. Representative name:  
 Name of group represented:  
 Address / phone / fax:  
 How contacted and date:  
 Participating?  Yes  No  
 If yes, how?

3. Representative name:  
 Name of group represented:  
 Address / phone / fax:  
 How contacted and date:  
 Participating?  Yes  No  
 If yes, how?

Applicant  
 (Print Full Name)

JACOB Barkley

Signature

for Jake Barkley, Master Rep

Date

Jan. 31. 18

M. Ring

