



DEH CHO FIRST NATIONS

HEAD OFFICE-HAY RIVER DENE RESERVE (ADMIN BUILDING)

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BRANCH OFFICE-BOX 89, FORT SIMPSON, N.W.T. X0E 0N0

TEL: (867) 695-2355 FAX: (867) 695-2038



Facsimile

Date:

Feb. 28/03

To:

ALAN EHRLICH

Organization:

HUEIRB

Fax:

867-766-7074

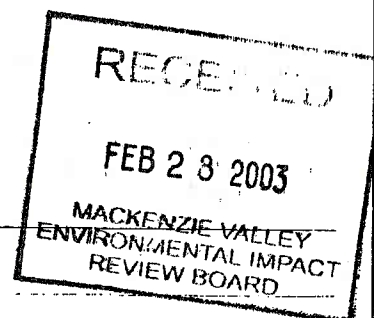
Phone:

From:

Laura Pitkanen, Resource Management Coordinator

Operator:

Number of pages including cover sheet:

4Wastan Geco EA Form

The originals will:



be mailed



Remain on file

If you have any problems receiving this fax please contact the operator at (867) 695-2355.

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WESTERN GEO

Identification of Environmental Assessment Roles

Review Board File: EA02-002 WesternGeCo Ltd. Mackenzie River 2D Seismic

Please read the Review Board's *Rules of Procedure for Environmental Assessment and Environmental Impact Review Proceedings (RoP)* and Section 111 of the *Mackenzie Valley Resource Management Act (MVRMA)* prior to completing this form.

WesternGeCo Ltd. does not have to respond as the developer is automatically afforded status as a Directly Affected Party. Consultants retained by the Review Board will automatically be afforded status as Specialist Advisors.

If there are any questions, please contact Alan Ehrlich, A/ Manager of Environmental Impact Assessment, at (867) 766-7056 or aehrich@mveirb.nt.ca.

Please e-mail or fax (867-766-7074) the completed form to Joe Acorn by Friday march 14th.

Section 1 – Designated Regulatory Agency

Please indicate whether or not your agency is a Designated Regulatory Agency in accordance with s.111 of the *MVRMA*.

Designated Regulatory Agency Status: ☐ Yes ☐ No

If yes, please describe the license(s), permit(s) or other authorization(s) required from your agency for this development to proceed.

Section 2 – Regulatory Authority

Please indicate whether or not your department or agency is a Regulatory Authority in accordance with s.111 of the *MVRMA*.

Regulatory Authority Status: ☐ Yes ☐ No

If yes, please describe the license(s), permit(s) or other authorization(s) required from your department or agency for this development to proceed under any federal or territorial law.

Section 3 - Responsible Minister

Please indicate whether or not your department is a Responsible Minister in accordance with s.111 of the *MVRMA*. Note that it is not necessary to issue a license, permit or other authorization to be classified as a Responsible Minister.

Responsible Minister Status: ☐ Yes ☐ No

If yes, please describe your jurisdiction in relation to the development under federal or territorial law.

Section 4 - Rules of Procedure Classifications

Please select one of the classifications listed below that indicate the status that you or your department, agency or organization are requesting in this environmental assessment before the Review Board. **Do not select more than one classification. See Note 1 at the end of the form.**

- ☒ Directly Affected Party (proceed to Section 5)
- ☐ Intervener (proceed to Section 6)
- ☐ Member of the Public (proceed to Section 7)
- ☐ None of the Above (proceed to Section 8)

Section 5 - Directly Affected Party

Please describe your eligibility and reason for requesting status as a Directly Affected Party, the role that you intend to play in this EA and the information that you anticipate submitting to the Review Board (i.e. general comments, information requests, technical reviews). Proceed to Section 8 after completing this section.

FIRST NATIONS ORGANIZATION REPRESENTING DIRECTLY AFFECTED COMMUNITIES. WILL REVIEW MATERIALS, RESPOND, SUBMIT INFORMATION REQUESTS.

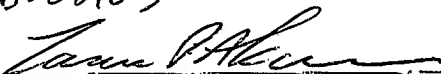
Section 6 - Intervener

Please describe your reason for requesting status as an Intervener, the role that you intend to play in this EA and the information that you anticipate submitting to the Review Board (i.e. general comments, information requests, technical reviews). Proceed to Section 8 after completing this section.

Section 7 – Member of the Public

Please describe your reason for requesting status as a Member of the Public, the role that you intend to play in this EA and the information that you anticipate submitting to the Review Board.

Section 8 – Contact Information

Name (one contact only): DEH CHO FIRST NATIONS : LAURA PITKANEN
Title: RESOURCE MANAGEMENT COORDINATOR
Organization: DEH CHO FIRST NATIONS
Mailing Address: Box 89, FORT SIMPSON, NT. X0E 0N0
Courier Address:
Phone Number: 867-695-2355
Fax Number: 867-695-2038
E-mail Address: dehchofn@cancom.net
Number of Copies Requested for Mailed or Couriered Materials: 1
Communication Preference (fax or e-mail): FAX
Date: Feb. 28/03
Signature: 

Note 1:

There is no difference between the rights or obligations associated with the classifications of Directly Affected Party or Intervener. The two groups are together referred to as Parties in the Rules of Procedure. As such, there is no need to request status under both classifications.

An important distinction between a Member of the Public and the other two classifications is that a Member of the Public cannot issue or receive information requests or be cross-examined on evidence provided to the Review Board.