

For owners with more than one snowmobile: of
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INFORMATION REQUEST FOR SNOWMOBILE OWNERS IN THE QIKIQTAALUK AND KIVALLIQ REGIONS OF NUNAVUT

A- PERSONAL INFORMATION

1.	First Name	Family Name	-
2.	Mailing address:		
	P.O. BoxMu	nicipalityPostal Code _	
3.	Telephone Number:		
4.	Are you a member of a H	Hunters and Trappers Organization?	
	Yes N	No	
5.	Are you a beneficiary und	der the Nunavut Land Claims Agreemen	ıt?
	Yes N	No	



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SNOWMOBILE INFORMATION B-

6.	When did you purchase the snowmobile (month and year)?							
7.	Did you purchase the snowmobile from a dealer? Yes No							
8.	Make	_ Model (type)	Year of Manufacture:					
	A. Serial number: _		-					
	B. Please provide an indication of engine size or displacement:							
	(CC)							
9.	Plate number (if the snowmobile is licensed in the community):							
10.	Please describe the r	egular maintenance done on yo	our snowmobile.					
_								
_								
-								



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وموگر		
Nunavul		

11.	Please provide either the current reading on the
	odometer or an estimate of the distance the snowmobile
	has traveled, in kilometers or miles.

miles	

kilometers____

12. Estimate the amount of time the snowmobile is use for the following purposes:

Hunting, guiding, outfitting & trapping	Family camping, sport, other recreational activities	Other (please specify)	Total
			100%

Risk Management –
P.O. Box 2260, Iqaluit, NU X0A 0H0
Tel: 867-975-5809 or Toll free 1-866- 975-5800



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C-**DESCRIPTION OF PROBLEM**

with the operation of your snowmobile du	Please provide a brief description of any problems you may have encountered with the operation of your snowmobile during the 2001/2002 winter (if more space is needed please attach a separate sheet):				
14. As a result of these problems has your snowmobile been repaired?					
YES	NO				
If YES, please answer the question at line 16.	If NO, please answer the question at line 15.				



15. If you answered NO at line 14 have you been able to operate your snowmobile?

YES	NO
If YES, please go to line 17	If NO, please circle the month below in which your snowmobile stopped working then please go to line 17

2001			2002					
Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May

16. If you answered YES on line 14:

A. Attach copies of invoices you received for having repairs completed;

or

B. If you repaired your own snowmobile, attach copies of any invoices for parts that where required and provide below an estimate of the number of hours you may have work on your snowmobile.

Estimate		
Herimare		



17. If you have experienced s 2001 please provide a bri	similar problems with your outboard motor in the fall of life description below:
1 1	•
18. Please sign and date the f fax to:	form and return to your local Wildlife Officer or mail or
Risk Management,	
P.O. Box 2260, Iqaluit NU	
X0A 0H0	
Fax number 1-867-975-:	5845
Signature of snowmobile own	
Signature of Showmoulle Owl	ner
Dated	at