

City of Albuquerque

Environmental Health Department

Air Quality Division

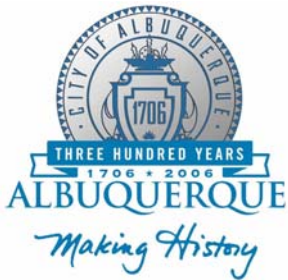
Permit Application Review Fee Instructions

All source registration, authority-to-construct, and operating permit applications for stationary or portable sources shall be charged an application review fee according to the fee schedule in 20 NMAC 11.02. These filing fees are required for both new construction, reconstruction, and permit modifications applications. Qualified small businesses as defined in 20.11.02 NMAC may be eligible to pay one-half of the calculated case-by-case air quality review fees prior to adding any federal program review or state toxic review fees.

Please fill out the permit application review fee checklist and submit with a check or money order payable to the "City of Albuquerque, Permits Program (Fund 242)" and either:

1. be delivered in person to the Environmental Health Department, Finance Section, 3rd floor, Room 3023, Albuquerque/Bernalillo County Government Center (City Hall), One Civic Plaza NW, Albuquerque, NM or,
2. mailed to Attn: Finance Section, Environmental Health Department, P.O. Box 1293, Albuquerque, NM 87103.

The Finance Section will provide the applicant with a receipt if received in person or will send the applicant a receipt if received by mail. The applicant shall attach a copy of the receipt issued by the Finance Section to the application as proof of payment. Application review fees shall not be refunded without the written approval of the Director. If a refund is requested, a reasonable professional service fee to cover the costs of staff time involved in processing such requests shall be assessed. Please refer to 20.11.02 NMAC (effective March 2004) for more detail concerning the "Permit Fees" regulation as this checklist does not relieve the applicant from any applicable requirement of the regulation.



City of Albuquerque

Environmental Health Department

Air Quality Division

Permit Application Review Fee Checklist

Please completely fill out the information in each section. Incompleteness of this checklist may result in the Environmental Health Department Finance Section not accepting the application review fees. If you should have any questions concerning this checklist, please call 768-1972.

I. Company Information

Company Name		
Company Address		
Facility Name		
Facility Address		
Contact Person		
Contact Person Phone Number		
Are these application review fees for an existing permitted source located within the City of Albuquerque or Bernalillo County?	Yes	No
If yes, what is the permit number associated with this modification?	Permit #	
Is this application review fee for a Qualified Small Business as defined in 20 NMAC 11.02?	Yes	No

II. Please check the category that applies to the facility and permit application. If any of the following source categories do not apply to the facility, proceed to section III.

Check One	Application Type	Review Fee
	Auto Body Repair and Painting	\$ 500.00
	Dry Cleaners	\$ 500.00
	Emergency Generators	\$ 500.00
	Generic Coating and Abrasive Operations	\$ 500.00
	Other Fueling Facilities Receiving fuel by truck or rail (Non-NSPS)	\$ 1,000.00
	Non-NSPS Boilers (Greater than 10 million Btu/hr)	\$ 500.00
	Printing and packaging operations	\$ 500.00
	Retail and fleet gasoline service stations	\$ 500.00
	Soil/Water Remediation Systems	\$ 1,000.00
	<i>Not Applicable</i>	<i>See Section III</i>

III. If section II does not apply to the facility and permit application, please determine the New Source Case-by-Case Review Fees. The application review fees are based on the potential to emit (PTE) of any air pollutant as defined in 20 NMAC 11.02 (effective July 1, 2001). If this application is for a modification please see Section V.

Check One	New Source (Based on PTE)	Review Fee
	Air Pollutant Equal to and less than 5 tpy	\$ 500.00
	Air Pollutant Equal to or greater than 5 tpy and less than 25 tpy	\$ 1,000.00
	Air Pollutant Equal to or greater than 25 tpy and less than 50 tpy	\$ 2,000.00
	Air Pollutant Equal to or greater than 50 tpy and less than 75 tpy	\$ 3,000.00
	Air Pollutant Equal to or greater than 75 tpy and less than 100 tpy	\$ 4,000.00
	Air Pollutant Equal to or greater than 100 tpy	\$ 5,000.00
	<i>Not Applicable</i>	<i>See Section II or V</i>

IV. Please check all the Federal Air Programs and State Toxic Air Pollutant Programs that apply to the facility and permit application.

Check	Type of Program	Review Fee
	40 CFR 60 "New Source Performance Standards" (NSPS)	\$ 1,000.00
	40 CFR 61 "Emission Standards for Hazardous Air Pollutants (NESHAPs)	\$ 1,000.00
	40 CFR 63 (NESHAPs) Promulgated Standards	\$ 2,000.00
	40 CFR 63 (NESHAPs) Case-by-Case MACT Review	\$ 10,000.00
	Prevention of Significant Deterioration (PSD) Permit Or Non-Attainment Permit	\$ 5,000.00
	Acid Rain Permit	\$ 5,000.00
	State Toxic Air Pollutant Review	\$ 500.00
	<i>Not Applicable</i>	<i>Not Applicable</i>

V. If the permit application is for modification to an existing permit or is for a portable source relocation, please check one that applies.

Check One	Modification Type	Review Fee
	Pollution Prevention Modifications	No Charge
	Minor/Flexible Permit Modifications	\$ 1,000.00
	Major Modifications	\$ 5,000.00
	Administrative Modifications	\$ 100.00
	Portable Source Relocation	\$ 250.00
	<i>Not Applicable</i>	<i>See Section II or III</i>

VI. Please submit a check or money order in the amount shown for the total application review fee.

Modification Type	Review Fee Amount
Section II Total	\$
Section III Total	\$
Section IV Total	\$
Section V Total	\$
Total Application Review Fee	\$

I, the undersigned, a responsible official of the applicant company, certify that to the best of my knowledge, the information stated on this checklist, give a true and complete representation of the permit application review fees which are being submitted. I also understand that an incorrect submittal of permit application reviews may cause an incompleteness determination of the submitted permit application and that the balance of the appropriate permit application review fees shall be paid in full prior to further processing of the application.

Signed this _____ day of _____ 20____

Print Name

Print Title

Signature