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NMAC TRANSMITTAL FORM

1.24.10 NMAC

[Sequence # _____]

1. Issuing Agency	2. Agency Code (DFA)
Albuquerque-Bernalillo County Air Quality Control Board	No. 4233 (Internal Control # Assigned by SRCA 2/8/08)

3. Agency Address

c/o Environmental Health Department, Air Quality Division
P.O. Box 1293, One Civic Plaza NW
Albuquerque, NM 87103

4. Contact Person

Name	Neal Butt	Phone #	(505) 768-2660	FAX	505-768-2617
E-mail	nbutt@cabq.gov				

5. Type of Rule Action

New [ ] Amendment [X] Renumber [ ] Repeal [ ] Emergency [ ]

6. Total number of pages:	13	7. Hearing date:	4/10/13	8. Effective date:	5/13/13

9. NMAC Number

Title	Chapter	Part
20	11	42

10. NMAC Name

Title	Chapter	Part
Environmental Protection	Albuquerque-Bernalillo County Air Quality Control Board	Operating Permits

11. Amendment Description	12 Amendment's NMAC Citation
Amended 2 sections	Sections 7 & 12

13 Most recent filing date (if applicable)

12 / 10 / 10

14 Are there any materials incorporated by reference?

No X Yes ____

Please list attachments and Internet site(s) if applicable

	Reference / Internet site
1.	
2	

15 If materials are attached, has copyright permission been received?

No [ ] Yes [ ] Public domain [ ]

16 Legal citation(s) that allows the *Issuing Agency* to regulate and the *Issuing Authority* to promulgate regulations on this subject (provide all that apply).

New Mexico Air Quality Control Act, NMSA 1978 Section 74-2-4, 74-2-5.C, the Joint Air Quality Control Board Ordinance, Bernalillo County Ordinance 94-5 Section 4; and the Joint Air Quality Control Board Ordinance, Revised Ordinances of Albuquerque 1994 Section 9-5-1-4.

17 Signature & Title of Issuing Authority (*Delegated authority must be on file*)

Name: Dona Upson, MD

Check if delegated authority [X]

Title: Board Chair

Signature: Dona Upson MD

Date Signed: 4/10/13