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Permit Information

NPDES ID: NMR1005YY

Reason for Termination: Change of Control over the site.

Operator Information

Operator Name: Presbyterian Healthcare Services

Address Line 1: PO Box 26666

Address Line 2:

City: Albuquerque

ZIP/Postal Code: 87125

State: NM

County or Similar Division: Bernalillo

Phone: 505-563-6635

Ext.:

Email: ECornish@phs.org

Operator Point of Contact

First Name Middle Initial Last Name: Eric , Cornish

Project/Site Information

Project/Site Name: Volcano Mesa

Project/Site Address

Address Line 1: Oakridge Street W of Universe Blvd

Address Line 2:

City: Albuquerque

ZIP/Postal Code: 87114

State: NM

County or Similar Division: Bernalillo

Certification Information

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

Certified By: Eric Cornish

Certifier Title: VP of Real Estate and Development

Certifier Email: ecornish@phs.org

Certified On: 11/10/2023 10:03 AM ET