



# Stormwater Quality Plan Information Sheet and Inspection Fee Schedule

**Project Name:** \_\_\_\_\_

**Project Location:** (address or major cross streets/arroyo) \_\_\_\_\_

**Plan Preparer Information:**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (O) \_\_\_\_\_ (Cell (optional)) \_\_\_\_\_

e-Mail: \_\_\_\_\_

**Property Owner Information:**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

e-Mail: \_\_\_\_\_

**I am submitting the ESC plan to obtain approval for:**

\_\_\_ Grading \_\_\_ Building Permit \_\_\_ Work Order Construction Plans

Note: More than one item can be checked for a submittal

**Stormwater Quality Inspection fee:** (based on development type and disturbed area)

Commercial	< 2 acres \$300 <input type="checkbox"/>	2 to 5 acres \$500 <input type="checkbox"/>	>5 acres \$800 <input type="checkbox"/>
Land/Infrastructure	< 5 acres \$300 <input type="checkbox"/>	5 to 40 acres \$500 <input type="checkbox"/>	>40 acres \$800 <input type="checkbox"/>
Multi - family	< 5 acres \$500 <input type="checkbox"/>	≥5 acres \$800 <input type="checkbox"/>	
Single Family Residential	<5 acres \$500 <input type="checkbox"/>	5 to 40 acres \$1000 <input type="checkbox"/>	> 40 acres \$1500 <input type="checkbox"/>

Plan Review fee is \$105 for the first submittal ☐ and \$75.00 for a resubmittal ☐

Total due equals the plan review fee plus the Stormwater Quality Inspection fee.

**Total Due \$** \_\_\_\_\_

If you have questions, please contact Doug Hughes, Stormwater Quality 924-3420, [jhughes@cabq.gov](mailto:jhughes@cabq.gov)



# CITY OF ALBUQUERQUE INVOICE

**BURNS & MCDONNELL JOE LAVENDER**

**3501 E SPEEDWAY BLVD SUITE 245**

Reference NO: SI-2023-01079

Customer NO: CU-163560202

Date	Description	Amount
6/12/23	2% Technology Fee	\$8.10
6/12/23	Application Fee	\$405.00

Due Date: **6/12/23**

Total due for this invoice:

**\$413.10**

Options to pay your Invoice:

1. Online with a credit card: <http://posse.cabq.gov/posse/pub/lms/Default.aspx>
2. In person: Plaza Del Sol, 600 2nd St. NW, Albuquerque, NM 87102

PLEASE RETURN THE BOTTOM PORTION OF THIS INVOICE NOTICE WITH PAYMENT



**City of Albuquerque**  
PO Box 1293  
Albuquerque, NM 87103

**Date:** 6/12/23  
**Amount Due:** **\$413.10**  
**Reference NO:** SI-2023-01079  
**Payment Code:** 130  
**Customer NO:** CU-163560202

BURNS & MCDONNELL JOE LAVENDER  
3501 E SPEEDWAY BLVD SUITE 245  
TUCSON, AZ 85716



130 0000SI202301079000993551183097920000000000000004131CU163560202

**Sokolowski, Paul**

**Subject:** RE: Payment Confirmation: 2023165004-27

**From:** [NOREPLY\\_cabq@ipayment.com](mailto:NOREPLY_cabq@ipayment.com) <[NOREPLY\\_cabq@ipayment.com](mailto:NOREPLY_cabq@ipayment.com)>

**Sent:** Thursday, June 15, 2023 11:21 AM

**To:** Brown, Janet <[Janet.Brown@curiaglobal.com](mailto:Janet.Brown@curiaglobal.com)>

**Subject:** Payment Confirmation: 2023165004-27

**External:** This message originated outside of the organization from [01000188c012c1a0-ad878375-df08-4291-b2c5-c18e9ba319f2-000000@amazonses.com](mailto:01000188c012c1a0-ad878375-df08-4291-b2c5-c18e9ba319f2-000000@amazonses.com). Do not click links or open attachments unless you recognize the sender or know the content is safe.



**Receipt**

Your Reference Number:

**2023165004-27**

06/15/2023 11:18:45 AM

**TRANSACTIONS**

Building Permits, Business Registrations, Code Enforcement Permits and Planning Applications 2023165004-27-1	\$413.10
Name: BURNS & MCDONNELL JOE LAVENDER - CU163560202	
Customer Number: CU163560202	
Permit Information	\$8.10
Permit Number: SI-2023-01079	
Permit Description: TF001: Planning: Technology Fee Application (Site Improvement Plan)	
Name: BURNS & MCDONNELL JOE LAVENDER - CU163560202	
Permit Information	\$405.00
Permit Number: SI-2023-01079	
Permit Description: PL002: Planning: Application Fee (Site Improvement Plan)	
Name: BURNS & MCDONNELL JOE LAVENDER - CU163560202	

Mastercard Service Fee 2023165004-27-4	\$11.36
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**TOTAL AMOUNT:\$424.46**

**PAYMENT**

Mastercard Credit Sale M	\$413.10
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Card Number:  
\*\*\*\*\*3626

First Name:  
Janet  
Last Name:  
Brown

Mastercard Service Fee Credit Sale M	\$11.36
--------------------------------------	---------

Card Number:  
\*\*\*\*\*3626

First Name:  
Janet  
Last Name:  
Brown  
Payment Type:  
credit

CE2023165004-27