



# 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

**KIMLEY-HORN KIMLEY-HORN**

**1000 2ND AVE SUITE 3900**

Reference NO: SI-2022-00953

Customer NO: CU-153950330

Date	Description	Amount
5/16/22	2% Technology Fee	\$7.50
5/16/22	Application Fee	\$375.00

Due Date: **5/16/22**

Total due for this invoice:

**\$382.50**

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



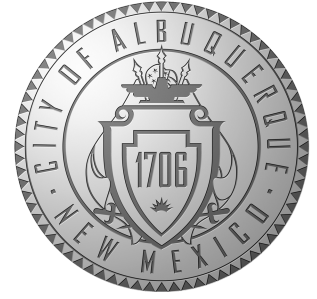
**City of Albuquerque**  
PO Box 1293  
Albuquerque, NM 87103

**Date:** 5/16/22  
**Amount Due:** **\$382.50**  
**Reference NO:** SI-2022-00953  
**Payment Code:** 130  
**Customer NO:** CU-153950330

KIMLEY-HORN KIMLEY-HORN  
1000 2ND AVE SUITE 3900  
SEATTLE , WA 98104



130 0000SI20220095300099355115867920300000000000003825CU153950330



## Your transaction is complete – Thank you!

Your request for payment has been received.

An additional confirmation will be sent to your email account if it was provided with the payment.

Your Reference Number: **2022136009-79**

05/17/2022 5:12:15 PM

<b>Total Amount:</b>	<b>\$393.02</b>
<b>Building Permits, Business Registrations, Code Enforcement Permits and Planning Applications 2022136009-79-1</b> NAME: KIMLEY-HORN KIMLEY-HORN - CU153950330 CUSTOMER NUMBER: CU153950330	<b>\$382.50</b>
<b>Permit Information</b> PERMIT NUMBER: SI-2022-00953 PERMIT DESCRIPTION: TF001: Planning: Technology Fee Application (Site Improvement Plan) NAME: KIMLEY-HORN KIMLEY-HORN - CU153950330	<b>\$7.50</b>
<b>Permit Information</b> PERMIT NUMBER: SI-2022-00953 PERMIT DESCRIPTION: PL002: Planning: Application Fee (Site Improvement Plan) NAME: KIMLEY-HORN KIMLEY-HORN - CU153950330	<b>\$375.00</b>
<b>American Express Service Fee 2022136009-79-4</b>	<b>\$10.52</b>
<b>American Express Credit Sale M</b> CARD NUMBER: *****1003 LAST NAME: Willmot	<b>\$382.50</b>
<b>American Express Service Fee Credit Sale M</b> CARD NUMBER: *****1003 LAST NAME: Willmot	<b>\$10.52</b>
<b>Total Amount:</b>	<b>\$393.02</b>



CE2022136009-79

Payment processing disclaimer. Set me in Workgroup Config

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