NPDES FORM		UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 Low Erosivity Waiver Certification	FORM Approved OMB No. 2-4-0004	
Waiver Eligibility Information	1			
NPDES ID: NMR1002T5         State where your construction site is located: NM         Is your construction site located on Indian Country Lands? No         Are you requesting coverage under this NOI as a "Federal Operator" as defined in Appendix A(https://www.epa.gov/sites/production/files/2019-05/documents/final_2017_cgp_appendix_adefinitions.pdf)?         No				
Is construction activity at the project site less than five (5) acres in area? Yes  Is your rainfall erosivity factor (R-Factor (https://lew.epa.gov)) less than five (5)? Yes				
Low Erosivity Waiver Inform	ation			
Estimated Project Start Dat		Estimated Project End Date: 07/02/2020		
Estimated Area to be Disturbed (in Acres): 1.25				
Construction site's R-Facto		Rainfall Erosivity factor was calculated using: Online Calcul	ator	
Are interim non vegetative site stabilization measures used to establish the project completion date for purposes of obtaining this waiver? No				
Operator Information				
Operator Information				
Operator Name: Sundance Village, LP				
Operator Mailing Address: Address Line 1: 412 NW 5th Ave				
Address Line 2: Suite 200		City: Portland		
ZIP/Postal Code: 97209		State: OR		
County or Similar Division	n: MULTNOMAH			
Operator Point of Contact Information   First Name, Middle Initial, Last Name: Chad   L   Rennaker   Title: General Partner   Phone: 503-288-6210   Ext. 12   Email: crennaker@pacificap.com				
Project/Site Information				
Project/Site Name: Monterey Place Apartments				
Project/Site Address Address Line 1: 2306-2320 Central Ave SW				
Address Line 1: 2002320 Celital Ave Swy Address Line 2: City: Albuquerque				
ZIP/Postal Code: 87104		State: NM		
County or Similar Division: BERNALILLO				
Latitude/Longitude: 35.095089°N, 106.675116°W				
Latitude/Longitude.		Horizontal Reference Datum: WGS 84		

## 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 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: Heather M. Boyd

Certifier Title: Operator

Certifier Email: hboyd@pacificap.com

Certified On: 02/25/2020 11:53 AM ET