

## Transmittals for: PROJECTS Only

## Payment-in-Lieu for Storm Water Quality Volume Requirement

CASH COUNT	AMOUNT	ACCOUNT NUMBER	FUND NUMBER	BUSINESS UNIT	PROJECT ID	ACTIVITY ID	AMOUNT
TOTAL CHECKS	\$ 5,568.00	461615	305	PCDMD	24_MS4	7547210	\$ 5, 568.00
TOTAL AMOUNT						TOTAL DEPOSIT	\$5, 568.00

Hydrology#:	J19D088 Payment In-I Volume Req	Lieu For Storm Water Quality uirement	Name:	Kaseman Hospital SE Parking Lot				
Address/Lega Description:	I	8324 Constitution PI. NE						
DEPARTMENT NAME: Planning Department/Development Review Services, Hydrology								
PREPARED BY Renée C. Brissette, P.E. CFM PHONE 505-924-3995								
BUSINESS DATE October 6, 2020								
DUAL VERIFICATION OF DEPOSIT Renée C. Brissette EMPLOYEE SIGNATURE								
AND BY	EMPLOYEE SI	GNATURE						
REMITTER:								
Amount:								
Снеск #:		DATE ON CHECK:						

The Payment-in-Lieu can be paid at the Plaza del Sol Treasury, 600 2<sup>nd</sup> St. NW. **Bring three copies of this invoice to the Treasury** and provide a copy of the receipt to Hydrology, Suite 201, 600 2<sup>nd</sup> St. NW, or e-mail with the Hydrology submittal to PLNDRS@cabq.gov.



**Date:** 10/23/2020 Office: WEB Cashier:admin Batch: 11524 Tran #: 69 Building Permits 5:10 PM Station ID Office WEB **Receipt #:** 00647900 **Reference** SI-2020-01180 Trans Amt: \$5,568.00 130 Building Permit \$5,568.00 Payment Total: \$5,568.00 -----Transaction Total: \$5,568.00 VISA Tendered : \$5,568.00 Thank you for your payment. Have a nice day!