



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: **2024270005-26**

09/27/2024 6:04:59 PM

Total Amount:	\$617.10
<b>Building Permits, Business Registrations, Code Enforcement</b>	\$617.10
<b>Permits and Planning Applications 2024270005-26-1</b>	
NAME: SCOOTER HAYNES - CU63582762	
CUSTOMER NUMBER: CU63582762	
<b>Permit Information</b>	\$605.00
PERMIT NUMBER: SI-2024-01368	
PERMIT DESCRIPTION: PL002: Planning: Application Fee (Site Improvement Plan)	
NAME: SCOOTER HAYNES - CU63582762	
<b>Permit Information</b>	\$12.10
PERMIT NUMBER: SI-2024-01368	
PERMIT DESCRIPTION: TF001: Planning: Technology Fee Application (Site Improvement Plan)	
NAME: SCOOTER HAYNES - CU63582762	
ACH	\$617.10
Total Amount:	\$617.10



Payment processing disclaimer. Set me in Workgroup Config

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# CITY OF ALBUQUERQUE INVOICE

**SCOOTER HAYNES**

**PO BOX 9043**

Reference NO: SI-2024-01368

Customer NO: CU-63582762

Date	Description	Amount
9/20/24	2% Technology Fee	\$12.10
9/20/24	Application Fee	\$605.00

Due Date: **9/20/24**

Total due for this invoice:

**\$617.10**

Options to pay your Invoice:

1. Online with a credit card: <https://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:** 9/20/24  
**Amount Due:** **\$617.10**  
**Reference NO:** SI-2024-01368  
**Payment Code:** 130  
**Customer NO:** CU-63582762

SCOOTER HAYNES  
PO BOX 9043  
ALBUQUERQUE, NM 87119



130 0000SI202401368000993551212102787000000000000061710CU63582762



## 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 (SWPPP map) and NOI to obtain approval for:**

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

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

\_\_\_ **I am submitting the SWPPP map and NOT to obtain a Stabilization Determination**

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

Commercial BP	< 2 acres \$300 <input type="checkbox"/>	2 to 5 acres \$500 <input type="checkbox"/>	>5 acres \$800 <input type="checkbox"/>
Work Order (WO)	< 5 acres \$300 <input type="checkbox"/>	5 to 40 acres \$500 <input type="checkbox"/>	>40 acres \$800 <input type="checkbox"/>
Multi – family BP	< 5 acres \$500 <input type="checkbox"/>	>5 acres \$800 <input type="checkbox"/>	
Single Family Residential BP	<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)

Rev June 2023