



# 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)

Rev May 2019



# CITY OF ALBUQUERQUE INVOICE

MS CONSULTANTS INC MS CONSULTANTS INC

333 EAST

Reference NO: SI-2024-00295

Customer NO: CU-162523797

Date	Description	Amount
3/01/24	2% Technology Fee	\$1.50
3/01/24	Storm Water Plans Review - Resubmit	\$75.00

Due Date: **3/01/24**

Total due for this invoice:

**\$76.50**

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:** 3/01/24  
**Amount Due:** \$76.50  
**Reference NO:** SI-2024-00295  
**Payment Code:** 130  
**Customer NO:** CU-162523797

MS CONSULTANTS INC MS  
CONSULTANTS INC  
333 EAST  
YOUNGSTOWN, OH 44503



130 0000SI20240029500099355119924188200000000000000765CU162523797



## 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: **2024122001-60**

05/01/2024 12:15:08 PM

<b>Total Amount:</b>	<b>\$78.60</b>
<b>Building Permits, Business Registrations, Code Enforcement Permits and Planning Applications 2024122001-60-1</b> NAME: MS CONSULTANTS INC MS CONSULTANTS INC - CU162523797 CUSTOMER NUMBER: CU162523797	<b>\$76.50</b>
<b>Permit Information</b> PERMIT NUMBER: SI-2024-00295 PERMIT DESCRIPTION: TF001: Planning: Technology Fee Application (Site Improvement Plan) NAME: MS CONSULTANTS INC MS CONSULTANTS INC - CU162523797	<b>\$1.50</b>
<b>Permit Information</b> PERMIT NUMBER: SI-2024-00295 PERMIT DESCRIPTION: DRS013: Planning: Storm Water Quality (Site Improvement Plan) NAME: MS CONSULTANTS INC MS CONSULTANTS INC - CU162523797	<b>\$75.00</b>
<b>Mastercard Service Fee 2024122001-60-4</b>	<b>\$2.10</b>
<b>Mastercard Credit Sale M</b> CARD NUMBER: *****5554 FIRST NAME: Michael LAST NAME: Roop	<b>\$76.50</b>
<b>Mastercard Service Fee Credit Sale M</b> CARD NUMBER: *****5554 FIRST NAME: Michael LAST NAME: Roop PAYMENT TYPE: credit	<b>\$2.10</b>
<b>Total Amount:</b>	<b>\$78.60</b>



CE2024122001-60