ERID-204342



IRM-RMMSO

Official Correspondence Form

Name:	U1101192		
Title:	Fee Assessment Periodic Monitoring Report for Vapor-Sampling Activities at Material Disposal Area V Consolidated Unit 21-018(a)-99 at Technical Area 21 February 2011 LANL EPA ID NM0890010515 HWB-LANL-11-032		
Date Received:	7/6/2011		01101192
Addressee Name:	M. Graham, ADEP		192
Originator:	J. Kieling, NMED		
Action Item Description:			
Action Due Date:	9/2/2011		
Responsible for Action:	Search Graham, Michael J		
Responsible Office:	ADEP		
Distribution:	Michael J. Graham Isaac E. RichardsonIII C. A. Beard David J. McInroy Phoebe K. Suina William Z. Alexander Tina M. Sandoval Paul Henry	Charles F. McMillan Richard A. Marquez Deborah K. Woitte James C. Cantwell Anthony R. Grieggs Victoria A. George Scotty Jones	



Lieutenant Governor

NEW MEXICO ENVIRONMENT DEPARTMENT

Hazardous Waste Bureau

2905 Rodeo Park Drive East, Building 1 Santa Fe, New Mexico 87505-6303 Phone (505) 476-6000 Fax (505) 476-6030

www.nmenv.state.nm.us



DAVE MARTIN
Cabinet Secretary

RAJ SOLOMON, P.E. Deputy Secretary

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

July 1, 2011

George J. Rael, Assistant Manager Environmental Projects Office Los Alamos Site Office U.S. Department of Energy 3747 West Jemez Road, MS A316 Los Alamos, NM 87544 Michael Graham, Associate Director Environmental Programs Los Alamos National Security, L.L.C. P.O. Box 1663, MS 991 Los Alamos, NM 87545

RE: FEE ASSESSMENT

PERIODIC MONITORING REPORT FOR VAPOR-SAMPLING ACTIVITIES AT MATERIAL DISPOSAL AREA V, CONSOLIDATED UNIT 21-018(A)-99, AT TECHNICAL AREA 21, FEBRUARY 2011 LOS ALAMOS NATIONAL LABORATORY (LANL) EPA ID #NM0890010515 HWB-LANL-11-032

The New Mexico Environment Department (NMED) has received the *Periodic Monitoring Report for Vapor-Sampling Activities at Material Disposal Area V, Consolidated Unit 21-018(a)-99, at Technical Area 21, February 2011*, dated May 26, 2011. NMED has accepted the submittal for review in accordance with the New Mexico Hazardous Waste Permit and Corrective Action Fee Regulations, 20.4.2.201.B(2) NMAC. NMED will review the submittal after the appropriate fees have been received. The fee invoice is attached to this letter. Upon receipt of the payment, NMED will initiate a technical review of the submittal in accordance with 20.4.2.201.B(3) NMAC.

Payment is due within sixty (60) calendar days from the date that you receive the invoice in accordance with 20.4.2.301.C NMAC. If you disagree with the fee assessed, you may notify the NMED in writing, at the address above, of the intent to appeal the invoice under the provisions of 20.4.2.302.A NMAC.

Messrs. Rael and Graham July 1, 2011 Page 2

If payment is by check, then you must provide the invoice number on the check. If payment is transmitted electronically, then you must submit a letter to Mr. James Valdez, NMED Hazardous Waste Bureau, indicating the invoice number, payment amount, and the assessed activity prior to transferring funds.

If you have any questions regarding this letter, please contact Ben Wear at (505) 476-6041.

Sincerely,

John E. Kieling

Acting Chief

Hazardous Waste Bureau

cc: J. Valdez, NMED HWB

J. Kieling, NMED HWB

D. Cobrain, NMED HWB

B. Wear, NMED HWB

B. Wedgeworth, EP-TA-21 MS C349

W. Woodworth, DOE-LASO, MS A316

D. McInroy, EP-CAP, MS M992

File: LANL 2011, MDA V TA 21 and Reading

LANL-11-032



New Mexico Environment Department Hazardous Waste Bureau

Los Alamos National Lab P O Box 1663 MS-M992 Los Alamos, NM 87545 Attn: Cindy Maze July 1, 2011

Invoice # - HWB-LANL-11-032

Periodic Monitoring Report for Vapor-Sampling Activities at MDA V, Consolidated Unit 21-018(a)-99, at Technical Area 21, February 2011

Quantity	Item	Item Cost	Total Cost
1	Periodic Monitoring Report - 1st Unit	\$2,000.00	\$2,000.00
		Total Fees	\$2,000.00
		Adjustment	\$0.00
		Pay This Amount	\$2,000.00

Make Checks Payable to: NMED/HWB

Mail Checks and Invoice to:

New Mexico Environment Department, HWB

Attn: James Valdez

2905 Rodeo Park Drive East, Bldg 1

Santa Fe, NM 87505

State of New Mexico	Use Only:
Date Received:	
Check Number:	HTG
Amount Received:	

