



SUSANA MARTINEZ  
Governor

JOHN A. SANCHEZ  
Lieutenant Governor

*State of New Mexico*  
**ENVIRONMENT DEPARTMENT**

**Hazardous Waste Bureau**

2905 Rodeo Park Drive East, Building 1  
Santa Fe, New Mexico 87505-6313  
Phone (505) 476-6000 Fax (505) 476-6030  
[www.env.nm.gov](http://www.env.nm.gov)



BUTCH TONGATE  
Cabinet Secretary

J.C. BORREGO  
Deputy Secretary

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

May 23, 2017

Karen Armijo  
Permitting and Compliance Manager  
Los Alamos Field Office  
3747 West Jemez Road, MS A316  
Los Alamos, NM 87544

John Bretzke  
Division Director  
Environmental Protection and Compliance Division  
Los Alamos National Laboratory  
P.O. Box 1663, MS-M991  
Los Alamos, NM 87545

**RE: FEE ASSESSMENT  
NOTIFICATION OF CLASS 1 PERMIT MODIFICATION TO UPDATE  
AND PROVIDE CLARIFICATION TO ATTACHMENT D OF THE LOS  
ALAMOS NATIONAL LABORATORY (LANL) HAZARDOUS WASTE  
FACILITY PERMIT  
EPA ID #NM0890010515  
HWB-LANL-17-029**

Dear Ms. Armijo and Mr. Bretzke:

The New Mexico Environment Department (Department) has received from the United States Department of Energy and Los Alamos National Security, LLC, (collectively, the Permittees) a *Notification of Class 1 Permit Modification to Update and Provide Clarification to Attachment D of the Los Alamos National Laboratory (LANL) Hazardous Waste Facility Permit (PMR)* and referenced by EPC-DO-17-145 and LA-UR-17-22808. The Permittees submitted this permit modification request (PMR) on May 12, 2017, seeking to modify the Permit to update descriptions and names in Attachment D of the Permit.

The Department 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. The fee invoice is attached to this letter. If you disagree with the fee assessed, you may notify NMED in writing, at the address above, of the intent to appeal the invoice under the provisions

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Ms. Armijo and Mr. Bretzke  
May 23, 2017  
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of 20.4.2.302.A NMAC.

The New Mexico Hazardous Waste Permit and Corrective Action Fee Regulations, 20.4.2.201.F NMAC require the assessment of fees. Payment is normally due within sixty (60) calendar days from the date that you receive the invoice in accordance with 20.4.2.301.C NMAC. However, because the Department currently maintains a supplemental fee agreement with the Permittees for State fiscal year 2017, and the Permittees transmitted payment of supplemental fees, the fee invoice has been effectively paid under these supplemental fees.

If you have any questions regarding this correspondence, please contact Siona Briley of my staff at 505-476-6049.

Sincerely,



Neelam Dhawan  
Manager, LANL Group  
Hazardous Waste Bureau

Attachments

- 1) Fee Invoice

cc w/o attachments:

J. Valdez, NMED HWB  
N. Dhawan, NMED HWB  
S. Briley, NMED HWB  
M. Haagenstad, EPC-CP, MS-K404  
S. Martinez, ADEM-MA M992  
L. King, EPA 6PD-N  
locatesteam@lanl.gov

File: 2017 LANL, Fee Letter Class 1 without prior approval PMR  
LANL-17-029

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**New Mexico  
Environment Department  
Hazardous Waste Bureau**

Los Alamos National Lab  
P O Box 1663  
MS-M992  
Los Alamos, NM 87545  
Attn: Accounts Payable

May 23, 2017

Invoice # - HWB-LANL-17-029

Notification of Class 1 Permit Modification to Update and Provide Clarification to Attachment D of the Los Alamos National Laboratory (LANL) Hazardous Waste Facility Permit.

Quantity	Item	Item Cost	Total Cost
1	Class 1 (without prior approval)	\$500.00	\$500.00
		<b>Total Fees</b>	\$500.00
		<b>Adjustment</b>	\$0.00
		<b>Pay This Amount</b>	<b>\$500.00</b>

PAID BY  
SUPPLEMENTAL FEE  
AGREEMENT  
MAY 23, 2017

**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**

When you provide a check as payment, you authorize the State of New Mexico to either use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

Check Number: \_\_\_\_\_ Amount Received: \_\_\_\_\_  
Date Received: \_\_\_\_\_

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