

STATE OF ALASKA

SANITARY SURVEYS/INSPECTIONS AND WATER SYSTEMS EVALUATIONS

Department of Environmental Conservation

INVOICE #:

Inv Code: SSI

<p align="center">PAYMENT IS EXPECTED AT TIME OF SUBMITTAL</p> <p>Make check payable to: State of Alaska Drinking Water Program</p>	<p align="center">PWSID Number:</p> <hr/> <p align="center">DEC Contact:</p> <hr/> <p align="center">DEC Phone:</p> <hr/> <p align="center"><u>IMPORTANT:</u></p> <p>1. Please reference invoice number on your check. 2. Submit original of this form with your payment.</p>
<p>Applicant name, address and phone number:</p> <hr/> <hr/> <hr/>	
<p>Engineer/Project Contact:</p>	

Facility/Project Name:

Fee Reg Reference		Itemized Fee Amount	Amount Due
80.1910	INSPECTIONS		
(a)(1)	Inspections - hourly rate	\$ 64/hr	
80.1910	SANITARY SURVEYS		
(a)(2)(A)(i)	Groundwater source, first source	\$398	
(a)(2)(A)(ii)	Groundwater source, each additional source	\$117	
(a)(2)(B)(i)	Surface water source or a GWUDISW source, first source	\$585	
(a)(2)(B)(ii)	Surface water source or a GWUDISW source, each additional source	\$117	
(a)(2)(C)i	One surface water source and one groundwater source	\$585	
(a)(2)(C)ii	Surface water or groundwater source, each additional source	\$117	
(a)(2)(D)	A consecutive public water system	\$257	
(a)(2)(E)	A water hauler	\$205	
(a)(7)	Approval under 80.435 of an individual to conduct sanitary survey	\$293	
(a)(8)	Biennial renewal of an approval under (b)(7) of this subsection	\$204	
80.1910	WATER SYSTEM EVALUATIONS		
(a)(4)(A)	Annual inspection, surface water that avoids filtration, first source	\$626	
(a)(4)(B)	Annual inspection, surface water that avoids filtration, each additional source	\$117	
(a)(5)	Determination of whether a system is served by groundwater or GWUDISW		
(a)(5)(A)	if field assessment performed by the department	\$720	
(a)(5)(B)	if field assessment performed by authorized sanitary surveyor & dept. reviewed	\$100	
(a)(5)(C)	if requested and reviewed by dept. by provided by owner	\$720	
(a)(3)	Initial review and approval of complete SWTR filtration avoidance criteria, 80.620(c)	\$1,697	
(a)(13)	Comprehensive Performance Evaluation conducted by the department	\$64/hr	

Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card: <input type="checkbox"/> MC <input type="checkbox"/> VISA	TOTAL AMOUNT DUE: _____ TOTAL AMOUNT PAID: _____ AMOUNT DUE REMAINING: _____
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To legally construct, install, modify, or operate any part of a public drinking water system in Alaska, owners/operators are required to pay a plan review fee pursuant to AS 44. Please check the information on this form for accuracy. If there are any questions, please contact your local ADEC Office.

_____ Signature & Title of DEC Contact	_____ Date
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