



ALBUQUERQUE ENVIRONMENTAL HEALTH DEPARTMENT - AIR QUALITY DIVISION
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(505) 768 - 1972 (VOICE) 1-800-659-8331 (NEW MEXICO RELAY) (505) 768 - 1977 (FAX)



Website: <http://www.cabq.gov/airquality/>

Email Address: aqdei@cabq.gov

Application for Electronic Reporting

Facility Details

Permit #: _____
 Facility Name: _____
 Facility Location: _____

Method of Emissions Report Submittal:

(Indicate preferred method of submittal)

Direct Data Entry from Website _____
 Data File Import from Website _____
 Paper Submittal _____

Facility User

Name: _____
Title: _____
Street 1 _____
Street 2 _____
City, State and Zip code _____
Telephone (Area Code + Number): _____
E-Mail: _____
Roles Requested: Viewer or Editor (choose one)

 Administrator
 Submitter (responsible official)¹

Facility User

Name: _____
Title: _____
Street 1 _____
Street 2 _____
City, State and Zip code _____
Telephone (Area Code + Number): _____
E-Mail: _____
Roles Requested: Viewer or Editor (choose one)

 Administrator
 Submitter (responsible official)

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E-Mail: _____
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¹ A separate Electronic Reporting Signatory Application is required for each submitter (responsible official)

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