

**FORM F-3CP/GHG**  
**2021 ANNUAL FEE CALCULATION FOR COVERED SOURCES**  
 (For Air Pollutants Emitted During Calendar Year 2020)

Date Received  
by CAB: \_\_\_\_\_

**FACILITY INFORMATION** (Fill in the blanks. Update the information as needed.)

Facility Name:	Location:	Island:	Permit No.:
Mailing Address:	City:	State:	Zip Code: »
Contact Person:	Title:	Telephone No.:	
Responsible Official:	Title:	Telephone No.:	
SIGNATURE of Responsible Official:			Date:

Based on the information and belief formed after reasonable inquiry, the statements and information in all annual fee forms, F-1CP, F-1GHG, F-2CP, F-2GHG, & F-3CP/GHG, for this year, are true, accurate, and complete.

**2021 ANNUAL FEE CALCULATION**

<u>Payable to</u>	<u>Category</u>	<u>Total Emissions Subject to Fees</u>		<u>2021 \$/ton</u>		<u>Total</u>
<b>Clean Air Special Fund - COV</b>	Criteria Pollutant (from D on Form F-1CP)	_____	X	\$58.80	=	\$ _____
	CO <sub>2</sub> e Tons (from D on Form F-1GHG)	_____	X	\$0.07	=	\$ _____
	Total Payable to COV fund	_____		Subtotal of two lines above:		<b>A.</b>
<b>Clean Air Special Fund - NON</b>	Criteria Pollutant (from D on Form F-1CP)	_____	X	\$14.33	=	\$ _____
	CO <sub>2</sub> e Tons (from D on Form F-1GHG)	_____	X	\$0.05	=	\$ _____
	Total Payable to NON fund	_____		Subtotal of two lines above:		<b>B.</b>
The rates are established in accordance with HAR, §11-60.1-114, and are adjusted annually: The rates include the Consumer Price Index (CPI) adjustment of 1.75% (increase from <b>2018 to 2019</b> ): <b>2021</b> \$/ton charge for criteria pollutants for Clean Air Special Fund-COV = \$57.79 x 1.0175 = \$58.80/ton <b>2021</b> \$/ton charge for criteria pollutants for Clean Air Special Fund-NON = \$14.08 x 1.0175 = \$14.33/ton						<b>Total: C.</b> \$ _____

Write the CSP number on each check or money order.

If Line C is less than the minimum annual fee, submit the minimum annual fee with a check or money order made payable to: **"Clean Air Special Fund-COV."**  
 The minimum annual fee is defined as \$500.00, or \$42.00 per month for any fraction of a calendar year that the covered source was in operation or the CSP was valid.

If Line C is greater than \$500, pay the fee with two separate checks or money orders made payable to: **"Clean Air Special Fund-COV"** (written in the amount of Line A); **and**  
**"Clean Air Special Fund-NON"** (written in the amount of Line B)