

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1195009  
Vendor Name: Illinois Environmental Protection Agenc  
Invoice Number: 043045ABC 091724  
Invoice Date: 9/17/2024  
PO Number:  
Check Number: 0329814  
Check Amount: \$ 500.00  
Check Date: 09/18/2024  
Voucher Number: V0850333  
Document Type: AP Invoice

Document Below

## Check Request Form

This form may be used to request check payments only for those items for which the issuance of a purchase order would not be appropriate. Attach supporting documentation (e.g., invoice or agreement). Please refer to Administrative Procedure 2.21, Vendor Payment.

Date: \_\_\_\_\_ Vendor ID: \_\_\_\_\_ Vendor Name: \_\_\_\_\_

Payee Address: \_\_\_\_\_ Payment Due Date: \_\_\_\_\_

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
Total			\$

Check the appropriate box below:

- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.
- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have not yet been provided. The first approver indicated below will notify the Accounts Payable Office in writing when the goods/services have been delivered in a satisfactory condition/manner.

Description on Check:

Other Instructions:

### All requests will require the following approvals:

Requester: \_\_\_\_\_ Print Name: \_\_\_\_\_

Budget Officer: \_\_\_\_\_ Print Name: \_\_\_\_\_

Requests \$10,000 and over will require the additional approvals below:

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Area Administrator (only required if request is \$10,000 and over): \_\_\_\_\_ Print Name: \_\_\_\_\_

Area Cabinet Officer (only required if request is \$25,000 and over): \_\_\_\_\_ Print Name: \_\_\_\_\_

Board Approval Date (only required if request is \$25,000 and over): \_\_\_\_\_

**Return approved request and all supporting documentation to Accounts Payable (SRC 2132A), [invoicing@cod.edu](mailto:invoicing@cod.edu)**

## Check Request Form (*cont.*)

### Processing a Check Request:

To expedite the processing of a check request, or other non-purchase order disbursement, the requesting department should:

1. Verify that the vendor intake process has been completed by the Procurement Office.  
Payment cannot be made to a vendor until this process has been completed.
2. Complete and review this check request form and confirm that all relevant supporting documentation is attached including fully executed contracts, if applicable.
3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
4. Ensure that the general ledger account number is included and correct.
5. Maintain a copy of the approved check request form for department records.
6. Submit the completed check request form to the Accounts Payable Office.

The check request form will be returned to the budget officer if the information is incomplete, not in compliance with College Policy, or if budget is not available.



# Illinois Environmental Protection Agency

Bureau of Air • 1021 North Grand Avenue East • P.O. Box 19506 • Springfield • Illinois • 62794-9506

## FEE DETERMINATION FOR CONSTRUCTION PERMIT APPLICATION

### FOR AGENCY USE ONLY

ID Number: \_\_\_\_\_ Permit #: \_\_\_\_\_  
☐ Complete ☐ Incomplete Date Complete: \_\_\_\_\_  
Check Number: \_\_\_\_\_ Account Name: \_\_\_\_\_

This form is to be used to supply fee information that must accompany all construction permit applications. This application must include payment in full to be deemed complete. Make check or money order payable to the Illinois Environmental Protection Agency, Division of Air Pollution Control - Permit Section at the above address. Do NOT send cash. Refer to instructions (197-INST) for assistance.

### Source Information

1. Source Name: College of DuPage  
2. Project Name: College of DuPage Generator Catalysts 3. Source ID #: (if applicable) 043045ABC  
4. Contact Name: Chris Wosachlo 5. Contact Phone #: (630) 942-4225

### Fee Determination

6. The boxes below are automatically calculated.

Section 1 Subtotal \$0.00 + Section 2, 3 or 4 Subtotal \$500.00 = \$500.00  
Grand Total

### Section 1: Status of Source/Purpose of Submittal

7. Your application will fall under only one of the following five categories described below. Check the box that applies.

Proceed to applicable sections. For purposes of this form:

- **Major Source** is a source that is required to obtain a CAAPP permit.
- **Synthetic Minor Source** is a source that has taken limits on potential to emit in a permit to avoid CAAPP permit requirements (e.g., FESOP).
- **Non-Major Source** is a source that is not a major or synthetic minor source.

- ☒ Existing source without status change or with status change from synthetic minor to major source or vice versa. Proceed to Section 2.
- ☐ Existing non-major source that will become synthetic minor to major source. Proceed to Section 4.
- ☐ New major or synthetic minor source. Proceed to Section 4. \$0.00
- ☐ New non-major source. Proceed to Section 3. Section 1 Subtotal
- ☐ AGENCY ERROR. If this is a timely request to correct an issued permit that involves only an agency error and if the request is received within the deadline for a permit appeal to the Pollution Control Board. Skip Sections 2, 3 and 4. Proceed directly to Section 5.

This agency is authorized to require and you must disclose this information under 415 ILCS 5/39. Failure to do so could result in the application being denied and penalties under 415 ILCS 5 ET SEQ. It is not necessary to use this form in providing this information. This form has been approved by the forms management center.

### Section 2: Special Case Filing Fee

8. **Filing Fee.** If the application only addresses one or more of the following, check the appropriate boxes, skip Sections 3 and 4 and proceed directly to Section 5. Otherwise, proceed to Section 3 or 4 as appropriate.

- ☒ Addition or replacement of control devices on permitted units.
- ☐ Pilot projects/trial burns by a permitted unit
- ☐ Land remediation projects \$500.00
- ☐ Revisions related to methodology or timing for emission testing
- ☐ Minor administrative-type change to a permit