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## EPA MVECP Fee Filing Form (for electronic payments only)

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### Need Help?

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### US EPA Fee Form

[Help and EPA Instructions](#)

#### General Information

Date:	<input type="text" value="12/06/2016"/>
Process Code:	<input type="text"/>
Manufacturer Code:	<input type="text"/>
Manufacturer Name:	<input type="text"/>
Contact Name:	<input type="text"/>
Contact Email Address:	<input type="text"/>
Contact Phone:	<input type="text"/>

#### Comments:

EPA Form Number 3520-29

OMB Control No. 2060-0545

Approval expires 10/31/2016

The public reporting and recordkeeping burden for this collection of information is estimated to average 20 minutes per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.

## US EPA Fee Form

[Help and EPA Instructions](#)

### General Information

Date:

Process Code:

Manufacturer Code:

Manufacturer Name:

Contact Name:

Contact Email Address:

Contact Phone:

Engine Family / Evaporative Family / Test Group:

### Original Payment Information

Payment Date: (MM/DD/YYYY)

Amount Paid:

Check#/Wire/ACH/Pay.gov Tracking Number:

### Reason for Refund

- This family failed to receive an EPA certificate (no certificate issued)
- Manufacturer withdraws request for certification and no certificate will be issued
- Overpayment
- Other (Explain in comments box below)

Amount of Refund Requested:

Refund Method:

- Check
- Credit Card
- Electronic Refund

### Refund Check Information

Make check payable to:

Address 1:

Address 2:

City:

Country:

State/Province:  Zip/Postal Code:

### Comments:

# US EPA Fee Form

[Help and EPA Instructions](#)

## General Information

Date:

Process Code:

Manufacturer Code:

Manufacturer Name:

Contact Name:

Contact Email Address:

Contact Phone:

Engine Family / Evaporative Family / Test Group:

Note: If the Engine Family / Evaporative Family / Test Group has changed then you must submit a Correction/Revision form first.

## Original Payment Information

Payment Date: (MM/DD/YYYY)

Amount Paid:

Check#/Wire/ACH/Pay.gov Tracking Number:

## Reason for Additional Payment

Underpayment

Reduced fee payment for additional vehicles/engines

Has a certificate been issued?

New calendar year fee schedule change

Other (explain in comments box)

Yes

No

## Payment Information

Amount Owed:

Payment Type:

## Comments:

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## US EPA Fee Form

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### General Information

Date:	<input type="text" value="12/06/2016"/>
Process Code:	<input type="text" value="Submit Correction/Revision to Previous Fee Filing Form"/>
Manufacturer Code:	<input type="text"/>
Manufacturer Name:	<input type="text"/>
Contact Name:	<input type="text"/>
Contact Email Address:	<input type="text"/>
Contact Phone:	<input type="text"/>
Engine Family / Evaporative Family / Test Group:	<input type="text"/> <input type="checkbox"/>
Revised Engine Family / Evaporative Family / Test Group:	<input type="text"/>

### Original Payment Information

Payment Date: (MM/DD/YYYY)	<input type="text"/>
Amount Paid:	<input type="text"/>
Check#/Wire/ACH/Pay.gov Tracking Number:	<input type="text"/>

### Reason for Correction

- Typographical error in original Engine Family / Evaporative Family / Test Group
- Overpayment for original family name, please apply the overpayment to the revised Engine Family / Evaporative Family / Test Group
- Other (explain in comments box)

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#### General Information

Date:	<input type="text" value="12/06/2016"/>
Process Code:	<input type="text" value="Submit New Fee Filing Form"/>
Manufacturer Code:	<input type="text"/>
Manufacturer Name:	<input type="text"/>
Contact Name:	<input type="text"/>
Contact Email Address:	<input type="text"/>
Contact Phone:	<input type="text"/>
Calendar Year complete application submitted to EPA:	<input type="text"/> <input type="checkbox"/>
Engine Family / Evaporative Family / Test Group:	<input type="text"/> <input type="checkbox"/>

#### Payment Information

Amount Owed:	<input type="text"/>
Payment Type:	<input type="text"/>

#### Comments:

<input type="text"/>	<input type="text" value="Online ACH"/> <input type="text" value="Online Credit Card"/> <input type="text" value="Online Dwolla"/> <input type="text" value="Online PayPal"/> <input type="text" value="Offline ACH"/> <input type="text" value="Offline Wire"/>
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