STATE OF COLORADO

Ebert - DNR, Jared <jared.ebert@state.co.us>

Fwd: M1998-103 City of Limon Conversion Application structures and adjacent property owners proofs of notice

Hays - DNR, Peter <peter.hays@state.co.us> Mon, Aug 27, 2018 at 8:58 AM
To: Jared Ebert <Jared.Ebert@state.co.us>

for Patty's Pit

Peter S. Hays
Environmental Protection Specialist

COLORADO
Division of Reclamation, Mining and Safety
Department of Natural Resources

P 303.866.3567 Ext. 8124 | F 303.832.8106
1313 Sherman St., Room 215, Denver, CO 80203
peter.hays@state.co.us | www.mining.state.co.us

---------- Forwarded message ---------
From: **bruce humphries** <hlhumphries2@comcast.net>
Date: Sat, Aug 25, 2018 at 10:29 AM
Subject: M1998-103 City of Limon Conversion Application structures and adjacent property owners proofs of notice
To: Hays - DNR, Peter <peter.hays@state.co.us>
Cc: Dave Stone <DStone@townoflimon.com>

Attached are the green cards. Waiting on the proof of publication

Sent from Mail for Windows 10

3 attachments

8-24-2018 Limon Green Cards group 1.pdf
362K

8-24-2018 Limon Green Cards Group 2.pdf
359K

8-24-2018 Limon Green Cards Group 3.pdf
360K

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MR. Michael E. and Trudy L. O'Dwyer
C/O. Trudy O'Dwyer
P.O. Box 1030
Limon, CO 80828

9590 9402 2778 6351 4614 73

2. Article Number *(Transfer from service label)*

7017 0530 0001 0459 9566

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
8-16-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- Mail Restricted Delivery 00)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☑ Return Receipt for ~~Merchandise~~
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Geneva Rogers
P.O. Box 867
Limon Co 80828

9590 9402 2778 6351 4615 34

2. Article Number *(Transfer from service label)*

7017 0530 0001 0459 9559

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Denny Vigil

☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
8-16-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- Mail Restricted Delivery 00)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☑ Return Receipt for ~~Merchandise~~
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Pearl Moore, SR. Engineer
Century Link
308 E. Pikes Peak Ave
7th floor
Colorado Springs Co 80903

9590 9402 2778 6351 4615 58

2. Article Number *(Transfer from service label)*

7017 0530 0001 0459 9542

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery 00)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☑ Return Receipt for ~~Merchandise~~
- ☐ Signature Confirmation™
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1. Article Addressed to:

Mr. Sam Albrecht, Elbert County Mgr
Elbert County
215 Comanche St.
Limon, Co 80117

9590 9402 2778 6351 4615 41

2. Article Number *(Transfer from service label)*

[redacted] 9573

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery 00)
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1. Article Addressed to:

MR. DAVE Stone, Town Mgr.
Town of Limon
100 Civic Center DR.
Limon, Co 80828

9590 9402 2778 6351 4614 80

2. Article Number *(Transfer from service label)*

7017 0530 0001 0459 9535

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Brianne Stum ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Brianne Stum

C. Date of Delivery 8/10/18

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☑ Return Receipt for Merchandise
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms Tracy Grimes
P.O. Box 399
Limon, CO 80828

9590 9402 4002 8079 0701 40

2. Article Number *(Transfer from service label)*

7018 0680 0000 5810 6653

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Ed Grimes ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Ed Grimes

C. Date of Delivery 8-10-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
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- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
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