DRMS ePermitting Change of Contact

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

General Information

Submittal Date

6/19/2019

The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information.

Administrator Information

Administrator First Name

Mark

Administrator Last Name

Kokes

Administrator Email

mdkokes@gmail.com

Select a Permit Number *

M2006042

Select Contact Type *

Select all that apply

☑ Permittee Contact ☐ Permitting Contact ☑ Inspection Contact ☐ Additional Annual Fee Contact(s)

Permittee Contact Information

Permittee Company Name

MMM Partnership, LLP.

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Mark		Kokes

Address 1

36366 Cty Rd. 79

Address 2

City	State	Zip Code
Crook	CO	807260000

Telephone #

9704677780

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

mdkokes@gmail.com

Inspection Contact Information

Inspection Company Name

MMM Partnership

Salutation	First Name	Middle Initial	Last Name
Mr	Mark		Kokes

Address 1

36366 Cty Rd. 79

Address 2

City	State	Zip Code
Crook	CO	807260000

Telephone #

9704677780

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

mdkokes@gmail.com

Confirmation

Have you reviewed all the information provided on this form? *

☑ Yes