

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

8/4/2019

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

Glenda

Administrator Last Name

File

Administrator Email

glendafile@outlook.com

Select a Permit Number *

M2004047

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Farfrumwurkin, LLLP

Name change requires succession of operator application

Salutation

Mr

First Name

Jon

Middle Initial

P

Last Name

File

Address 1

P.O. Box 983

Address 2**City**

Broomfield

State

CO

Zip Code

800380000

Telephone #

3034043225

Digits only, no separators

Extension**Fax #**

3034040778

Digits only, no separators

Email Address

jon.file@comcast.net

Permitting Contact Information**Permitting Company Name**

Weiland, Inc.

Salutation

Mr

First Name

Peter

Middle Initial**Last Name**

Wayland

Address 1

P.O. Box 18087

Address 2**City**

Boulder

State

CO

Zip Code

80308

Telephone #

3034439521

Digits only, no separators

Extension**Fax #**

3034439536

Digits only, no separators

Email Address**Inspection Contact Information****Inspection Company Name**

Farfrumwurkin, LLLP

Salutation

Mr

First Name

Jon

Middle Initial

P

Last Name

File

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Broomfield

State

CO

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Email Address

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Confirmation

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

☒ Yes