DRMS ePermitting Change of Contact

Digits only, no separators



General Information				
Submittal Date 9/9/2019 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 Kyrei			Administrator Last Name Zion	
Administrator Email kyrei.zion@elbertcounty-co.gov				
Select a Permit Number * M1983130				
Select Contact Type * Select all that apply ✓ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☐ Additional Annual Fee Contact(s)				
Permittee Contact Information				
Permittee Company Name Elbert County Name change requires succession of operator application				
Salutation	First Name	Mic	ldle Initial	Last Name
Ms	Kyrei			Zion
Address 1 Address 2				
P.O. Box 116				
City	SI	tate		Zip Code
Kiowa	C	0		801170000
Telephone #		Extension	Fax #	
3036213157			3036213174	l

Digits only, no separators

Email Address

kyrei.zion@elbertcounty-co.gov

Confirmation

Have you reviewed all the information provided on this form? ${\color{red}^{\star}}$

▼ Yes