DRMS ePermitting Change of Contact

mvripp@aol.com



General Information				
Submittal Date 10/17/2019 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 Administrator Last Name				
Mark	Name		Gardner	
Administrator Email whiteh2o@acsol.net	I			
Select a Permit Nur M2017027	nber*			
Select Contact Type * Select all that apply ☐ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☑ Additional Annual Fee Contact(s)				
Annual Fee Notice to Copy Additional people you would like to receive notices of upcoming annual fee/report due dates				
Remove Existing Contact? □ Remove				
Salutation Mr	First Name *		Middle Initial	Last Name * Ripp
Annual Fee Notice (Company Name			
Address 1			Address 2	
City Delta		State Co		Zip Code
Telephone # 9708745127 Digits only, no separate	ors	Extension	Fax # Digits only, no separat	ors
Email Address			- <i>,,</i> , , , , , , , , , , , , , , , , ,	

Confirmation

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

✓ Yes