DRMS ePermitting Change of Contact

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

General Information

Submittal Date

1/28/2020

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

Linda

Administrator Last Name

DeRose

Administrator Email

lderose@moffatcounty.net

Select a Permit Number *

M1978007

Select Contact Type *

Select all that apply

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

Permitting Contact Information

Permitting Company Name

Moffat County

Salutation	First Name	Middle Initial	Last Name
Ms	Linda		DeRose

Address 1

PO Box 667

Address 2

City	State	Zip Code
Craig	CO	816260000

Telephone #	Extension	Fax #
9708243211		9708240356
Digits only, no separators		Digits only, no separators

Email Address

lderose@moffatcounty.net

Confirmation

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

☑ Yes