

DRMS ePermitting Change of Contact



COLORADO

Division of Reclamation,
Mining and Safety

Department of Natural Resources

General Information

Submittal Date

4/21/2020

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

Peter

Administrator Last Name

Hurt

Administrator Email

peter@arkansasvalleyranch.com

Select a Permit Number *

M2006054

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Arkansas Valley Ranch, LLC

Name change requires succession of operator application

Salutation

Mr

First Name

Peter

Middle Initial

Last Name

Hurt

Address 1

8351 E Walker Springs Ln

Address 2

Ste 302

City

Knoxville

State

TN

Zip Code

379233140

Telephone

2569962479

Digits only, no separators

Extension

Fax

Digits only, no separators

Email Address

peter@arkansasvalleyranch.com

Confirmation

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



Yes