

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

4/29/2020

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

Daylan

Administrator Last Name

Figgs

Administrator Email

dfiggs@fcgov.com

Select a Permit Number *

M1979097

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

City of Fort Collins

Name change requires succession of operator application

Salutation

Mr

First Name

Mark

Middle Initial**Last Name**

Sears

Address 1

P.O. Box 580

Address 2**City**

Fort Collins

State

CO

Zip Code

805220000

Telephone #

9704162096

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

Msears@fcgov.com

Permitting Contact Information**Permitting Company Name**

City of Fort Collins

Salutation	First Name	Middle Initial	Last Name
Mr	Mark		Sears

Address 1	Address 2
P.O. Box 580	

City	State	Zip Code
Fort Collins	CO	805220000

Telephone #	Extension	Fax #
9704162096		
Digits only, no separators		Digits only, no separators

Email Address

msears@fcgov.com

Inspection Contact Information**Inspection Company Name**

City of Fort Collins

Salutation	First Name	Middle Initial	Last Name
Mr	Mark		Sears

Address 1	Address 2
P.O. Box 580	

City	State	Zip Code
Fort Collins	CO	805220000

Telephone #	Extension	Fax #
9704162096		
Digits only, no separators		Digits only, no separators

Email Address

Msears@fcgov.com

Annual Fee Notice to Copy

Additional people you would like to receive notices of upcoming annual fee/report due dates

Confirmation

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



Yes