DRMS ePermitting Change of Contact



General Information

Su	bmittal	l Date

5/27/2020

The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information

momation.				
Administrator Information				
Administrator First Name	Administrator Last Name			
Robert	Basher			
Administrator Email bbasher@deltacounty.com				
Select a Permit Number * M1978170				
Select Contact Type *				
Select all that apply Permittee Contact Permitting Contact Inspection Contact Additional Annual Fee Contact(s)				

Permittee Contact Information

Permittee Company Name						
Delta County Name change requires succession of operator application						
Name change requires succession of operator application						
Salutation	First Name	Middle Initial	Last Name			
Mr	Larry		Record			
Address 1		Address 2				
Irecord@deltacounty.com						

Telephone # Extension Fax #

State

CO

9708742133

City

Delta

Digits only, no separators

Zip Code

81416

Digits only, no separators

Email Address

Irecord@deltacounty.com

Confirmation

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

Yes