## **DRMS ePermitting Change of Contact**



#### **General Information**

Su	bmi	ttal	Date

6/19/2020

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	Administrator Last Name		
Heather	Stacy		
Administrator Email heather@southwayco.com  Select a Permit Number *			
M1984026			
Select Contact Type * Select all that apply			
✓ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☐ Additional Annual Fee Contact(s)			

#### **Permittee Contact Information**

### Permittee Company Name

Southway Construction Company, Inc.

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Ralph Martinez

Address 1 Address 2

117 White Pine Dr.

City State Zip Code

Alamosa CO 811010000

Telephone # Extension Fax #

7195895103 7195895522

Digits only, no separators Digits only, no separators

#### **Email Address**

safety@southwayco.com

# **Confirmation**

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

Yes