

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

8/18/2020

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

Robert

Administrator Last Name

Larson

Administrator Email

bob@mmsouray.com

Select a Permit Number *

M1979181

Select Contact Type *

Select all that apply

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

Permitting Contact Information

Permitting Company Name

MMS

Salutation

Mr

First Name

Robert

Middle Initial

A

Last Name

Larson

Address 1

P.O. Box 85

Address 2

342 7th Ave

City

Ouray

State

CO

Zip Code

81427

Telephone #

9703254600

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

bob@mmsouray.com

Inspection Contact Information**Inspection Company Name**

MMS

Salutation

Mr

First Name

Robert

Middle Initial

A

Last Name

Larson

Address 1

P.O. Box 85

Address 2**City**

Ouray

State

CO

Zip Code

81427

Telephone #

9703254600

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

bob@mmsouray.com

Confirmation

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



Yes