## **DRMS ePermitting Change of Contact**



## **General Information**

#### **Submittal Date**

8/31/2020

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** 

Debbie

Morgan

#### **Administrator Email**

debbie@pbgravel.com

Select a Permit Number \*

M2013080

## Select Contact Type \*

Select all that apply

## **Permittee Contact Information**

#### **Permittee Company Name**

Pine Bluffs Gravel & Excavating, Inc.

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Lonny Graves

Address 1 Address 2

PO Box 609

City State Zip Code

Pine Bluffs WY 820820000

Telephone # Extension Fax #

3072453748

Digits only, no separators Digits only, no separators

#### **Email Address**

lonny@pbgravel.com

## **Permitting Contact Information**

**Permitting Company Name** 

Pine Bluffs Gravel

Salutation First Name

Middle Initial

**Last Name** 

Lonny

Graves

Address 1

Address 2

PO BOX 609

City

State

**Zip Code** 

Pine Bluffs

Wy

820820000

Telephone #

**Extension** 

Fax #

3072453676

Digits only, no separators

3072453748

Digits only, no separators

**Email Address** 

lonny@pbgravel.com

## **Inspection Contact Information**

**Inspection Company Name** 

Pine Bluffs Gravel

Salutation First Name

**Middle Initial** 

**Last Name** 

Dustin

Gaspar

Address 1

Address 2

PO BOX 609

City

State

Zip Code

Pine Bluffs

WY

820820000

Telephone #

**Extension** 

Fax #

3072453676

3072453748

Digits only, no separators

**Email Address** 

dustin@pbgravel.com

Digits only, no separators

**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?  ${\color{red}^{*}}$ 

