## **DRMS ePermitting Change of Contact**



## **General Information**

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9/15/2020

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

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Administrator First Name

**Administrator Last Name** 

Jim

Reed

**Administrator Email** 

mac.reed@icloud.com

Select a Permit Number \*

M2018064

Select Contact Type \*

Select all that apply

## **Permittee Contact Information**

### **Permittee Company Name**

2nd Generation Mining, LLC

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Jim Reed

Address 1 Address 2

11786 Shadow Trail Drive, SW

City State Zip Code

Baxter MN 56425

Telephone # Extension Fax #

2183305697

Digits only, no separators

Digits only, no separators

#### **Email Address**

mac.reed@icloud.com

# **Permitting Contact Information**

### **Permitting Company Name**

2nd Generation Mining, LLC

Salutation **First Name** Middle Initial **Last Name** 

Reed

Address 1 Address 2

11786 Shadow Trail Drive, SW

City State **Zip Code** 

MN 56425 Baxter

Telephone # **Extension** Fax #

2183305697

Digits only, no separators

Digits only, no separators

#### **Email Address**

mac.reed@icloud.com

# **Inspection Contact Information**

### **Inspection Company Name**

2nd Generation Mining, LLC

Salutation **First Name** Middle Initial **Last Name** 

Mr Jim Reed

Address 1 Address 2

11786 Shadow Trail Drive, SW

City State Zip Code

MN 56425 Baxter

Telephone # **Extension** Fax #

2183305697

Digits only, no separators

**Email Address** 

mac.reed@icloud.com

Digits only, no separators

**Confirmation** 

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