## **DRMS ePermitting Change of Contact**



## **General Information**

Su	bmittal	l Date

9/18/2020

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

Administrator Information		
Administrator First Name	dministrator Last Name	
Mike	oelle	
Administrator Email mike.toelle@lafargeholcim.com		
Select a Permit Number * M1977346		
Select Contact Type *		
Select all that apply		
✓ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☐ Additional Annual Fee  Contact(s)		

## **Permittee Contact Information**

#### **Permittee Company Name**

Name change requires succession of operator application

**First Name** 

Michael Toelle Mr Address 1 Address 2

**Middle Initial** 

**Last Name** 

3500 Highway 120

Salutation

City State **Zip Code** 

Florence CO 81226

Telephone # **Extension** Fax #

7194295566

Digits only, no separators Digits only, no separators

### **Email Address**

mike.toelle@lafargeholcim.com

# **Confirmation**

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

