DRMS ePermitting Change of Contact



General Information

| C | la | 144-1 | D- | |
|----|----|-------|----|----|
| Su | DM | ittal | υa | τe |

12/15/2020

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 | Administrator Last Name | | | |
| Kelly | Hodge | | | |
| Administrator Email kahodge1@comcast.net | | | | |
| Select a Permit Number * M2008017 | | | | |
| Select Contact Type * | | | | |
| Select all that apply | | | | |
| ■ Permittee Contact ■ Permitting Contact ☑ Inspection Co | ntact Additional Annual Fee | | | |

Contact(s)

Inspection Contact Information

Inspection Company Name

Broken Arrow Investments, LLC

Salutation **First Name Middle Initial Last Name**

> Kelly Hodge

Address 1 Address 2

801 8th. st. Suit 130

City State **Zip Code**

Greeley CO 806310000

Telephone # **Extension** Fax #

9705665090

Digits only, no separators Digits only, no separators

Email Address

dnr_drmsminadmin@state.co.us

Confirmation

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

