DRMS ePermitting Change of Contact

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

General Information

Submittal Date

12/30/2020

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

Thomas

Administrator Last Name

Moltz

Administrator Email

tmoltz@acaproducts.com

Select a Permit Number *

M1979010

Select Contact Type *

Select all that apply

☑ Permittee Contact ☑ Permitting Contact ☑ Inspection Contact ☑ Additional Annual Fee Contact(s)

Permittee Contact Information

Permittee Company Name

ACA Products, Inc.

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Thomas		Moltz

Address 1

P.O. Box 1887

Address 2

702 Gregg Dr

City	State	Zip Code
Buena Vista	CO	81211

Telephone #	Extension	Fax #
7193953790		7193953794
Digits only, no separators		Digits only, no separators

Email Address

tmoltz@acaproducts.com

Permitting Contact Information

Permitting Company Name

ACA Products, Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Josh		Criswell

Address 1	Address 2
P.O. Box 1887	702 Gregg Dr

City	State	Zip Code
Buena Vista	CO	81211

Telephone #	Extension	Fax #
7193953790 Digits only, no separators		7193953794 Digits only, no separators

Email Address

jcriswell@acaproducts.com

Inspection Contact Information

Inspection Company Name

ACA Products, Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Josh		Criswell

Address 1	Address 2
P.O. Box 1887	702 Gregg Dr

City	State	Zip Code
Buena Vista	CO	81211

Telephone #	Extension	Fax #
7193953790 Digits only, no separators		7193953794 Digits only, no separators

Email Address

jcriswell@acaproducts.com

Annual Fee Notice to Copy

Additional people you would like to receive notices of upcoming annual fee/report due dates

Remove Existing Contact?

☐ Remove

Salutation	First Name *	Middle Initial	Last Name *
Ms	Jenniffer		Carlson-Mazza

Annual Fee Notice Company Name

Address 1
P.O. Box 1887

Address 2
702 Gregg Dr

City
Buena Vista

State
CO

Zip Code
81211

Telephone #
7193953790
Digits only, no separators

Extension

Fax #
7193953794
Digits only, no separators

Email Address
jcarlson-mazza@acaproducts.com

Confirmation

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

☑ Yes