#### **DRMS ePermitting Change of Contact**



## **General Information**

Submittal D	ate
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1/21/2021

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	
Ben	Moline	
Administrator Email ben.moline@molsoncoors.com  Select a Permit Number *  C1981028		
Select Contact Type *		
Select all that apply  Permittee Contact Permitting Contact Inspection Contact	act Additional Annual Fee Contact(s)	

## **Permittee Contact Information**

**Permittee Company Name** 

Coors Energy Company  Name change requires succession of operator application					
Salutation	First Name	Middle Initial	Last Name		
Mr	Ben		Moline		
Address 1		Address 2			
PO Box 4030					

Telephone # Extension Fax #

State

CO

3038104231

City

Golden

Digits only, no separators

Digits only, no separators

**Zip Code** 

80402

#### **Email Address**

ben.moline@molsoncoors.com

# **Confirmation**

Have you reviewed all the information provided on this form?  ${\color{red}^{\star}}$ 

Yes