

## **DRMS ePermitting Change of Contact**



**COLORADO**

**Division of Reclamation,  
Mining and Safety**

Department of Natural Resources

### **General Information**

#### **Submittal Date**

6/11/2021

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**

Tim

#### **Administrator Last Name**

McCracken

#### **Administrator Email**

tmccracken@deltacounty.com

#### **Select a Permit Number \***

M2007025

#### **Select Contact Type \***

Select all that apply

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

### **Permittee Contact Information**

#### **Permittee Company Name**

Delta County

Name change requires succession of operator application

#### **Salutation**

Mr

#### **First Name**

Tim

#### **Middle Initial**

#### **Last Name**

McCracken

#### **Address 1**

295 West 6th Street

#### **Address 2**

#### **City**

Delta

#### **State**

CO

#### **Zip Code**

81416

#### **Telephone #**

9708742035

Digits only, no separators

#### **Extension**

#### **Fax #**

Digits only, no separators

**Email Address**

tmccracken@deltacounty.com

**Permitting Contact Information****Permitting Company Name**

Delta County

| Salutation | First Name | Middle Initial | Last Name |
|------------|------------|----------------|-----------|
| Mr         | Michael    |                | Ripp      |

**Address 1**

P.O. Box 54

**Address 2**

| City  | State | Zip Code  |
|-------|-------|-----------|
| Delta | CO    | 814160000 |

| Telephone #                | Extension | Fax #                      |
|----------------------------|-----------|----------------------------|
| 9708745127                 |           | 9708743161                 |
| Digits only, no separators |           | Digits only, no separators |

**Email Address****Inspection Contact Information****Inspection Company Name**

Delta County

| Salutation | First Name | Middle Initial | Last Name |
|------------|------------|----------------|-----------|
| Mr         | Mark       |                | McMillan  |

**Address 1**

18830 G Road

**Address 2**

| City  | State | Zip Code |
|-------|-------|----------|
| Delta | CO    | 81416    |

| Telephone #                | Extension | Fax #                      |
|----------------------------|-----------|----------------------------|
| 9708742133                 |           | 9708740246                 |
| Digits only, no separators |           | Digits only, no separators |

**Email Address**

mmcmillan@deltacounty.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**

Mr

**First Name \***

Jason

**Middle Initial**

**Last Name \***

Husmann

**Annual Fee Notice Company Name**

Delta County

**Address 1**

**Address 2**

**City**

**State**

**Zip Code**

00000000

**Telephone #**

Digits only, no separators

**Extension**

**Fax #**

Digits only, no separators

**Email Address**

jhusmann@deltacounty.com

## Confirmation

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



Yes