

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

6/14/2021

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

Glenda

Administrator Last Name

Hocker

Administrator Email

glendahocker@live.com

Select a Permit Number *

M2004063

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Hocker Construction, LLP

Name change requires succession of operator application

Salutation

Mr

First Name

Glenda

Middle Initial**Last Name**

E Hocker

Address 1

4167 CR 321

Address 2

PO Box 627

City

Ignacio

State

CO

Zip Code

81137

Telephone #

9707490390

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

glendahocker@live.com

Inspection Contact Information**Inspection Company Name**

Hocker Construction, LLP

Salutation	First Name	Middle Initial	Last Name
Mr	Glenda		E Hocker

Address 1

4167 CR 321, PO Box 627

Address 2

PO Box 627

City	State	Zip Code
Ignacio	CO	81137

Telephone #

9707490390

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Extension**Fax #**

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Email Address

glendahocker@live.com

Confirmation

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



Yes