

## DRMS ePermitting Change of Contact



**COLORADO**

Division of Reclamation,  
Mining and Safety

Department of Natural Resources

### General Information

#### Submittal Date

7/21/2021

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

Dana

#### Administrator Last Name

Cline

#### Administrator Email

wshighburyr@gmail.com

#### Select a Permit Number \*

M1977310

#### Select Contact Type \*

Select all that apply

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

### Permittee Contact Information

#### Permittee Company Name

Highbury Resources Inc.

Name change requires succession of operator application

#### Salutation

Mr

#### First Name

Joshua

#### Middle Initial

#### Last Name

Bleak

#### Address 1

10808 S. River Front Parkway

#### Address 2

Suite 321

#### City

South Jordan

#### State

UT

#### Zip Code

840950000

#### Telephone #

3852461250

Digits only, no separators

#### Extension

#### Fax #

Digits only, no separators

**Email Address****Permitting Contact Information****Permitting Company Name**

Highbury Resources Inc.

| Salutation | First Name | Middle Initial | Last Name |
|------------|------------|----------------|-----------|
| Ms         | Dana       |                | Cline     |

| Address 1  | Address 2 |
|------------|-----------|
| PO BOX 700 |           |

| City  | State | Zip Code |
|-------|-------|----------|
| Nucla | CO    | 81424    |

| Telephone #                | Extension | Fax #                      |
|----------------------------|-----------|----------------------------|
| 9707734167                 |           |                            |
| Digits only, no separators |           | Digits only, no separators |

**Email Address**

wshighburyr@gmail.com

**Inspection Contact Information****Inspection Company Name**

Highbury Resources Inc.

| Salutation | First Name | Middle Initial | Last Name |
|------------|------------|----------------|-----------|
| Mr         | Scott      |                | Pottorff  |

| Address 1  | Address 2 |
|------------|-----------|
| PO BOX 700 |           |

| City  | State | Zip Code |
|-------|-------|----------|
| Nucla | CO    | 81424    |

| Telephone #                | Extension | Fax #                      |
|----------------------------|-----------|----------------------------|
| 9704331920                 |           |                            |
| Digits only, no separators |           | Digits only, no separators |

**Email Address**

Pottorff799@gmail.com

**Confirmation**

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



Yes