DRMS Comment Objection Intake Tool

Extension



By submitting this form, you are providing a comment or objection to the public record of a permitting action currently under review by the Division of Reclamation, Mining and Safety.

CONTACT INFORMATION
Date of Comment of Objection 07/21/2021
*Indicates a Required Field
Contact Type * Individual Group Agency Attorney Please select the appropriate option above to identify who you represent.
Your First Name * Sheila
Your Last Name * Carlon
Your Address * 32189 Robinson Hill Road
Your Address 2
Your City * Golden
Your State CO
Your Zip Code * Maximum of 10 digits. (Example) 80202 80403
Email Address * Enter a valid email address in this field to receive a confirmation e-mail. carlons529@gmail.com
Your Phone Number * Used only to follow up. 3039096554

Alternate Phone Number		
Used only to follow up.		
Alternate Phone Extension		
Connection to Operation *		
20 A 20 CO 20 CO 20 CO 30 CO 3		
Select all that apply		
Land Owner of affected land	Structure Owner within 200' of affected land	
☐ Mineral Owner☐ Adjacent Land Owner	✓ Nearby Resident✓ Concerned Citizen	
Government Agency	Other	
DECORPTION OF COMMEN	T OR ORIECTION	
DESCRIPTION OF COMMENT OR OBJECTION (Please be as specific as possible)		
Comment/Objection Narrative *		
	his stad to the Faci Occurrence size but the commissions	
	bjected to the Frei Quarry expansion but the commissioners e canyon has increased 20-fold. That road is now so dusty by	
the entrance that one cannot see when you drive by. Adding another quarry to this area is detrimental to the		
appeal of Gilpin County, ski and tourist traffic thro	ough the canyon and to wildlife. I am confident this is not how	
Gilpin County wants to present itself.		
Permit Number *		
Enter valid letter and then numbers, for example M122112211 or C123456789.		
C123456789		
Permitting Action Type		
Permit Type		
County *		
Jefferson		
Site Name		
Site Name		
Permittee/Operator Name		
Comment or Objection *		
Objection		
○ Support		
○ General Comment		
Agency Comment		
ADDITIONAL INFORMATION		

Are there supporting photos, maps, or documents you wish to upload? *		
○ Yes ● No		
By submitting this form electronically you agree to receive any/all follow up correspondence from the Division of		
Reclamation, Mining, and Safety at the email add	dress you have provided.	