

## DRMS ePermitting Change of Contact



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

### General Information

**Submittal Date**

8/4/2021

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**

Robert

**Administrator Last Name**

Frick

**Administrator Email**

rfrick@co.washington.co.us

**Select a Permit Number \***

M2004021

**Select Contact Type \***

Select all that apply

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

### Permittee Contact Information

**Permittee Company Name**

Washington County

Name change requires succession of operator application

**Salutation**

Mr

**First Name**

Danny

**Middle Initial**

D

**Last Name**

Rogers

**Address 1**

551 W. Second St.

**Address 2****City**

Akron

**State**

CO

**Zip Code**

80720

**Telephone #**

9703452337

Digits only, no separators

**Extension****Fax #**

9703456593

Digits only, no separators

**Email Address**

drogers@co.washington.co.us

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

Salutation	First Name	Middle Initial	Last Name
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Address 1	Address 2
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City	State	Zip Code
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Telephone #	Extension	Fax #
Digits only, no separators		Digits only, no separators

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

Washington County Road and Bridge

Salutation	First Name	Middle Initial	Last Name
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Mr	Danny	D	Rogers
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Address 1	Address 2
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551 W. Second St.	
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City	State	Zip Code
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Akron	CO	80720
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Telephone #	Extension	Fax #
9703452337		9703456593
Digits only, no separators		Digits only, no separators

**Email Address**

drogers@co.washington.co.us

**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 \***

Danny

**Middle Initial****Last Name \***

Rogers

**Annual Fee Notice Company Name**

Washington County Road &amp; Bridge Dist. 1

**Address 1**

551 W. Second St.

**Address 2****City**

Akron

**State**

CO

**Zip Code**

80720

**Telephone #**

9703452337

Digits only, no separators

**Extension****Fax #**

Digits only, no separators

**Email Address**

drogers@co.washington.co.us

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

Yes