## **DRMS ePermitting Change of Contact**



### **General Information**

Submittal [	Date
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10/7/2021

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	Administrator Last Name		
Richard	Saxton		
Administrator Email			
rick@prospace.biz			
Select a Permit Number *			
M2007042			
Select Contact Type *			
Select all that apply			
✓ Permittee Contact □ Permitting Contact □ Inspection Contact □ Additional Annual Fee			
	Contact(s)		

### **Permittee Contact Information**

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Permittee	Company	Name	

H/S Properties

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Richard Saxton

Address 1 Address 2

50 Heinz St.

City State Zip Code

Delta CO 814160000

Telephone # Extension Fax #

9708748006 9708743883

Digits only, no separators Digits only, no separators

#### **Email Address**

rick@prospace.biz

# **Confirmation**

Have you reviewed all the information provided on this form?  ${\color{red}^{*}}$ 

Yes