

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

3/29/2022

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

Mike

Administrator Last Name

Toelle

Administrator Email

mike.toelle@lafargeholcim.com

Select a Permit Number *

M1977247

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Holcim (US) Inc.

Name change requires succession of operator application

Salutation

Mr

First Name

Oscar

Middle Initial**Last Name**

Mancera

Address 1

3500 Highway 120

Address 2**City**

Florence

State

CO

Zip Code

812260000

Telephone #

5678080134

Digits only, no separators

Extension**Fax #**

7197842205

Digits only, no separators

Email Address

Oscar.mancera@holcim.com

Permitting Contact Information**Permitting Company Name**

Holcim (US) Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Oscar		Mancera

Address 1	Address 2
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3500 Highway 120

City	State	Zip Code
Florence	CO	812260000

Telephone #	Extension	Fax #
5678080134 Digits only, no separators		7197842205 Digits only, no separators

Email Address

oscar.mancera@holcim.com

Inspection Contact Information**Inspection Company Name**

Holcim (US) Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Oscar		Mancera

Address 1	Address 2
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3500 Highway 120

City	State	Zip Code
Florence	CO	812260000

Telephone #	Extension	Fax #
5678080134 Digits only, no separators		7197842205 Digits only, no separators

Email Address

Oscar.mancera@holcim.com

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 *

Julio

Middle Initial

Last Name *

Villon Durrand

Remove Existing Contact?

☐ Remove

Salutation

Mr

First Name *

Travis

Middle Initial

Last Name *

Bennett

Annual Fee Notice Company Name

Holcim (US) Inc.

Address 1

Address 2

City

State

Zip Code

Telephone #

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

travis.bennett@lafargeholcim.com

Confirmation

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

☒ Yes