DRMS ePermitting Change of Contact



General Information

Su	bmittal	l Date

6/15/2022

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	Administrator Last Name	
Billy	Ray	
Administrator Email bray@ensero.com		
Select a Permit Number * M1977300		
Select Contact Type * Select all that apply		
✓ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☐ Additional Annual Fee Contact(s)		

Permittee Contact Information

Permittee Company Name

Colorado Legacy Land, LLC

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Jim Harrington

Address 1 Address 2

333 W. Hampton Ave. Suite 935

City State Zip Code

Englewodd CO 80110

Telephone # Extension Fax #

9706322239

Digits only, no separators

Digits only, no separators

Email Address

jim@coloradolegacy.land

Confirmation

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

✓ Yes