

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

10/5/2022

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

Jordan

Administrator Last Name

Mead

Administrator Email

jordan.mead@summitcountyco.gov

Select a Permit Number *

M1993035

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Summit County Government and Town of Breckenridge

Name change requires succession of operator application

Salutation**First Name****Middle Initial****Last Name**

Katherine

King

Address 1**Address 2**

P.O. Box 5660

City**State****Zip Code**

Frisco

CO

804430000

Telephone #**Extension****Fax #**

9706684067

Digits only, no separators

Digits only, no separators

Email Address

katherine.king@summitcountyco.gov

Inspection Contact Information**Inspection Company Name**

Summit County Government

Salutation**First Name****Middle Initial****Last Name**

Katherine

King

Address 1**Address 2**

P.O. Box 5660

City**State****Zip Code**

Frisco

CO

804430000

Telephone #**Extension****Fax #**

9706684067

Digits only, no separators

Digits only, no separators

Email Address

katherine.king@summitcountyco.gov

Confirmation

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



Yes