DRMS ePermitting Change of Contact

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

General Information

Submittal Date

10/27/2022

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

Katie

Administrator Last Name

Blake

Administrator Email

katie.blake@newmont.com

Select a Permit Number *

M1980244

Select Contact Type *

Select all that apply

- [x] Permittee Contact
- [x] Permitting Contact
- [x] Inspection Contact
- [x] Additional Annual Fee Contact(s)

Permittee Contact Information

Permittee Company Name

Cripple Creek & Victor Gold Mining Company

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Ms	Lori		Smith

Address 1

P. O. Box 191

Address 2

City	State	Zip Code
Victor	CO	80860

Telephone #	Extension	Fax #
7198514315		7196893254
Digits only, no separators		Digits only, no separators

Email Address

Lori.Smith2@newmont.com

Permitting Contact Information

Permitting Company Name

Cripple Creek & Victor Gold Mining Company

Salutation	First Name	Middle Initial	Last Name
Ms	Katie		Blake

Address 1

P. O. Box 191

Address 2

City	State	Zip Code
Victor	CO	80860

Telephone #	Extension	Fax #
7196894048 Digits only, no separators		7192373442 Digits only, no separators

Email Address

Katie.Blake@Newmont.com

Inspection Contact Information

Inspection Company Name

Cripple Creek & Victor Gold Mining Company

Salutation	First Name	Middle Initial	Last Name
Ms	Johnna		Gonzalez

Address 1

P. O. Box 191

Address 2

City	State	Zip Code
Victor	CO	80860

Telephone #	Extension	Fax #
7198514190 Digits only, no separators		7193130447 Digits only, no separators

Email Address

Johnna.Gonzalez@newmont.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	First Name *	Middle Initial	Last Name *
Ms	Norma		Townley

Annual Fee Notice Company Name

Address 1

P. O. Box 191

Address 2

City	State	Zip Code
Victor	CO	80860

Telephone #

7198514255

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

Norma.Townley@newmont.com

Confirmation

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

☑ Yes