## **DRMS ePermitting Change of Contact**



General Information									
Submittal Date 3/6/2023									
The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information.									
Administrator Information									
Administrator Fi	rst Name		Administrator Last Name						
Lois			Hybarger						
Administrator Er Imhybarger@gmail									
Select a Permit I M1997098	Number *								
Select Contact Type * Select all that apply ✓ Permittee Contact									
Permittee Contact Information									
Permittee Company Name Flat Top Flagstone, LLC Name change requires succession of operator application									
Salutation	First Name		Middle Initial	Last Name					
	Lois			Hybarger					
Address 1		Address 2							
2695 Patterson Road			Suite 2-320						
City		State		Zip Code					
Grand Junction		СО		815060000					
Telephone #		Extension	Fax #						
9703141076 Digits only, no separ	rators		Digits only,	no separators					

## **Email Address**

rlazyj@gmail.com

## **Inspection Contact Information**

## Inspection Company Name

Flat Top Flagstone, LLC

	First Name	N	iddle Initial	Last Name	
VIs	Lois			Hybarger	
Address 1		l	Address 2		
2695 Patterson Road		S	Suite 2-320		
City		State		Zip Code	
Grand Junction		CO		815060000	
Telephone #		Extension	Fax #		
9703141076 Digits only, no separators			Digits only, no separators		
Email Address					
Annual Fe	e Notice to Co	ру			
Additional people y	ou would like to receive no	tices of upcoming annual fee/re	port due dates		
Confirmat					