DRMS ePermitting Change of Contact

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

General Information

Submittal Date

11/8/2023

The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information.

Administrator Information

Administrator First Name

Tim

Administrator Last Name

Gerken

Administrator Email

tgerken@telesto-inc.com

Select a Permit Number *

M1993059

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

Midwestern Farms

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Baxter		Kirkland

Address 1

P.O. Box 202

Address 2

City	State	Zip Code
Rye	CO	81069

Telephone #	Extension	Fax #
7196767777		7199319111
Digits only, no separators		Digits only, no separators

Email Address

accounting@sieteinc.net

Permitting Contact Information

Permitting Company Name

Siete, Inc

Salutation	First Name	Middle Initial	Last Name
Mr	Baxter		Kirkland

Address 1	Address 2
PO Box 202	

City	State	Zip Code
Rye	CO	81069

Telephone #	Extension	Fax #
7196767777 Digits only, no separators		7199319111 Digits only, no separators

Email Address

accounting@sieteinc.net

Inspection Contact Information

Inspection Company Name

Siete, Inc

Salutation	First Name	Middle Initial	Last Name
Mr	Baxter		Kirkland

Address 1	Address 2
PO Box 202	

City	State	Zip Code
Rye	CO	810690000

Telephone #	Extension	Fax #
7196767777 Digits only, no separators		7199319111 Digits only, no separators

Email Address

accounting@sieteinc.net

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 *
	Brooke		Boisvert

Remove Existing Contact?

☑ Remove

Salutation	First Name *	Middle Initial	Last Name *
Ms	Bev		Stithem

Remove Existing Contact?

☐ Remove

Salutation	First Name *	Middle Initial	Last Name *
Mr	Baxter		Kirkland

Annual Fee Notice Company Name

Siete, Inc

Address 1

PO Box 202

Address 2

City

State

Zip Code

Telephone #

7196767777

Digits only, no separators

Extension

Fax #

7199319111

Digits only, no separators

Email Address

accounting@sieteinc.net

Confirmation

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

☑ Yes