

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

11/30/2023

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

Karban

Administrator Last Name

Sturges

Administrator Email

sturges@meridmedia.com

Select a Permit Number *

P2012017

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Caldera Mineral Resources, LLC

Name change requires succession of operator application

Salutation

Mr

First Name

Sturges

Middle Initial**Last Name**

Karban

Address 1

593 110th Ave North

Address 2**City**

Naples

State

FL

Zip Code

34108

Telephone #

3107569337

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

skarban@thorinresources.com

Permitting Contact Information**Permitting Company Name**

Caldera Mineral Resources, LLC

Salutation	First Name	Middle Initial	Last Name
Mr	Sturges		Karban

Address 1	Address 2
593 110th Ave North	

City	State	Zip Code
Naples	FL	34108

Telephone #	Extension	Fax #
3107569337		
Digits only, no separators		Digits only, no separators

Email Address

skarban@thorinresources.com

Inspection Contact Information**Inspection Company Name**

Caldera Mineral Resources, LLC

Salutation	First Name	Middle Initial	Last Name
Mr	Sturges		Karban

Address 1	Address 2
593 110th Ave North	

City	State	Zip Code
Naples	FL	34108

Telephone #	Extension	Fax #
3107569337		
Digits only, no separators		Digits only, no separators

Email Address

cskerik@thorinresources.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 *

Chris

Skerik

Annual Fee Notice Company Name

Address 1

1900 main st

Address 2

unit 1

City

ouray

State

CO

Zip Code

81427

Telephone #

9493081651

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

cskerik@thorinresources.com

Confirmation

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



Yes