DRMS ePermitting Change of Contact

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

General Information

Submittal Date

2/5/2024

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

Joseph

Administrator Last Name

Houghton

Administrator Email

jphoughton@csu.org

Select a Permit Number *

M1992074

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

City of Colorado Springs

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Joseph		Houghton

Address 1

PO Box 1103

Address 2

Mail Code 940

City	State	Zip Code
Colorado Springs	CO	809470000

Telephone #	Extension	Fax #
7196683744		7196688666
Digits only, no separators		Digits only, no separators

Email Address

jphoughton@csu.org

Permitting Contact Information

Permitting Company Name

City of Colorado Springs Utilities

Salutation	First Name	Middle Initial	Last Name
Mr	Joseph		Houghton

Address 1	Address 2
PO Box 1103	Mail Code 0940

City	State	Zip Code
Colorado Springs	CO	809470940

Telephone #	Extension	Fax #
7196683744 Digits only, no separators		7196688666 Digits only, no separators

Email Address

jphoughton@csu.org

Inspection Contact Information

Inspection Company Name

Colorado Springs Utilities

Salutation	First Name	Middle Initial	Last Name
Ms	Michelle		Wills-Hill

Address 1	Address 2
PO Box 1103	MC 940

City	State	Zip Code
Colorado Springs	CO	809470940

Telephone #	Extension	Fax #
7196688683 Digits only, no separators		Digits only, no separators

Email Address

mwillshill@csu.org

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	Patti		Zietlow

Annual Fee Notice Company Name

City of Colorado Springs Utilities

Address 1	Address 2
PO Box 1103	Mail Code 0940

City	State	Zip Code
Colorado Springs	CO	809470940

Telephone #	Extension	Fax #
7196684171 Digits only, no separators		7196688666 Digits only, no separators

Email Address

pzietlow@csu.org

Confirmation

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

☑ Yes