

DRMS ePermitting Change of Contact



COLORADO

Division of Reclamation,
Mining and Safety

Department of Natural Resources

General Information

Submittal Date

3/5/2024

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

Cory

Administrator Last Name

Glover

Administrator Email

cory.glover@westerngravel.com

Select a Permit Number *

M1996008

Select Contact Type *

Select all that apply

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

Permitting Contact Information

Permitting Company Name

Western Gravel, Inc.

Salutation

First Name

Middle Initial

Last Name

Cory

Glover

Address 1

Address 2

3001 N. Townsend Ave.

City

State

Zip Code

Montrose

CO

814010000

Telephone

Extension

Fax

9702492431

9702490590

Digits only, no separators

Digits only, no separators

Email Address

cory.glover@westerngravel.com

Confirmation

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



Yes