

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

7/8/2024

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

CJ

Administrator Last Name

Dickerson

Administrator Email

cjdickerson@thorinresources.com

Select a Permit Number *

M2012032

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Thorin Resources, LLC

Name change requires succession of operator application

Salutation

Mr

First Name

Chris

Middle Initial**Last Name**

Skerik

Address 1

1900 Main St. Unit #1

Address 2**City**

Ouray

State

CO

Zip Code

814320000

Telephone #

9703162294

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

cskerik@thorinresources.com

Permitting Contact Information**Permitting Company Name**

Thorin Resources LLC

Salutation	First Name	Middle Initial	Last Name
Mr	Chris		Skerik

Address 1

1900 Main St. Unit #1

Address 2

City	State	Zip Code
Ouray	CO	814320000

Telephone #

9703162294

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

skarban@thorinresources.com

Inspection Contact Information**Inspection Company Name**

Salutation	First Name	Middle Initial	Last Name
Mr	Chris		Skerik

Address 1

1900 Main St. Unit #1

Address 2

City	State	Zip Code
Ouray	CO	814320000

Telephone #

9703162294

Digits only, no separators

Extension**Fax #**

Digits only, no separators

Email Address

skarban@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 *

Dave

Todaro

Remove Existing Contact?

☐ Remove

Salutation

First Name *

Middle Initial

Last Name *

Chris

Skerik

Annual Fee Notice Company Name

Thorin Resources LLC

Address 1

1900 Main St Unit 1

Address 2

PO Box 1030

City

Ouray

State

CO

Zip Code

81427

Telephone #

9703162294

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