DRMS ePermitting Change of Contact

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

General Information

Submittal Date

10/10/2024

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

Administrator Last Name

Administrator Email

Select a Permit Number *

M2018022

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Kit Carson County

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
	Theresa		Korbelik

Address 1

PO Box 160

Address 2

City	State	Zip Code
Burlington	CO	808070000

Telephone #	Extension	Fax #
7193468133	220	7193467242
Digits only, no separators		Digits only, no separators

Email Address

theresa.korbelik@kitcarsoncounty.org

Confirmation

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

☑ Yes