

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 *

M1998060

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

Address 2

P.O. Box 160

City

State

Zip Code

Burlington

CO

808070000

Telephone #

Extension

Fax #

7193468133

Digits only, no separators

7193467242

Digits only, no separators

Email Address

theresa.korbelik@kitcarsoncounty.org

Permitting Contact Information**Permitting Company Name**

Kit Carson County

Salutation

Mr

First Name

Dave

Middle Initial**Last Name**

Hornung

Address 1

P.O. Box 160

Address 2**City**

Burlington

State

CO

Zip Code

808070000

Telephone #

7193468133

Digits only, no separators

Extension**Fax #**

7193467242

Digits only, no separators

Email Address**Confirmation**

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



Yes