DRMS ePermitting Change of Contact

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

General Information

Submittal Date

12/19/2024

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

Ed

Administrator Last Name

Zebrowski

Administrator Email

ezebrowski@atwell.com

Select a Permit Number *

M2021001

Select Contact Type *

Select all that apply

- [ ] Permittee Contact
- [ ] Permitting Contact
- [x] Inspection Contact
- [ ] Additional Annual Fee Contact(s)

Inspection Contact Information

Inspection Company Name

Atwell, LLC.

Salutation	First Name	Middle Initial	Last Name
Mr	Ed		Zebrowski

Address 1

Two Towne Square

Address 2

Suite 700

City	State	Zip Code
Southfield	MI	480760000

Telephone #	Extension	Fax #
4802255917 Digits only, no separators		2484472001 Digits only, no separators

Email Address

ezebrowski@atwell.com

Confirmation

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

☑ Yes