DRMS ePermitting Change of Contact

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

General Information

Submittal Date

2/13/2025

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 *

M1998105

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Grand Junction Pipe & Supply Co.

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Bryan	K	Jorgensen

Address 1

556 Struthers Ave.

Address 2

City	State	Zip Code
Grand Junction	CO	815013826

Telephone #	Extension	Fax #
8015974471		9702436703
Digits only, no separators		Digits only, no separators

Email Address

bryan.jorgensen@kilgorecompanies.com

Permitting Contact Information

Permitting Company Name

Grand Junction Pipe & Supply Co

Salutation	First Name	Middle Initial	Last Name
Mr	Bryan	K	Jorgensen

Address 1

556 Struthers Ave.

Address 2

City	State	Zip Code
Grand Junction	CO	815013826

Telephone #	Extension	Fax #
8015974471 Digits only, no separators		9702436703 Digits only, no separators

Email Address

bryan.jorgensen@kilgorecompanies.com

Inspection Contact Information

Inspection Company Name

Grand Junction Pipe & Supply Co

Salutation	First Name	Middle Initial	Last Name
Mr	Bryan		Jorgensen

Address 1

7057 W 2100 S

Address 2

City	State	Zip Code
Salt Lake City	UT	84128

Telephone #	Extension	Fax #
9707126634 Digits only, no separators		9702436703 Digits only, no separators

Email Address

bryan.jorgensen@kilgorecompanies.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 *
Morgan

Middle Initial

Last Name *
Sandritter

Annual Fee Notice Company Name

Address 1

Address 2

City

State

Zip Code
000000000

Telephone #
Digits only, no separators

Extension

Fax #
Digits only, no separators

Email Address
morgan.sandritter@kilgorecompanies.com

Confirmation

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

☑ Yes