DRMS ePermitting Change of Contact

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

General Information

Submittal Date

3/12/2025

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

Jay

Administrator Last Name

Baker

Administrator Email

jbtcw@hotmail.com

Select a Permit Number *

M1991082

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Tiger Timber and Gravel Co

Name change requires succession of operator application

Salutation	First Name		Middle Initial	Last Name
Mr	Jay			Baker

Address 1	Address 2
P O Box 7641	

City	State	Zip Code
Woodland Park	CO	808630000

Telephone #	Extension	Fax #
7196861566		Digits only, no separators
Digits only, no separators		

Email Address

tess@mulecreekgravel.com

Permitting Contact Information

Permitting Company Name

Tiger TImber and Gravel Co

Salutation	First Name	Middle Initial	Last Name
Mr	Jay		Baker

Address 1	Address 2
P O Box 7641	

City	State	Zip Code
Woodland park	CO	808630000

Telephone #	Extension	Fax #
7196861566		Digits only, no separators
Digits only, no separators		

Email Address

tess@mulecreekgravel.com

Inspection Contact Information

Inspection Company Name

Tiger TImber and Gravel Co

Salutation	First Name	Middle Initial	Last Name
Mr	Jay		Baker

Address 1	Address 2
P O Box 7641	

City	State	Zip Code
Woodland Park	CO	808630000

Telephone #	Extension	Fax #
7196861566		Digits only, no separators
Digits only, no separators		

Email Address

tess@mulecreekgravel.com

Annual Fee Notice to Copy

Remove Existing Contact?

☑ Remove

Salutation	**First Name** *	**Middle Initial**	**Last Name** *
Ms	Stephanie		Howerton

Remove Existing Contact?

☐ Remove

Salutation	**First Name** *	**Middle Initial**	**Last Name** *
	Tess		Austin

Annual Fee Notice Company Name

Mule Creek Gravel, LLC

Address 1	**Address 2**

City	**State**	**Zip Code**

Telephone #   **Extension**

7196861566   **Fax #**

Digits only, no separators   Digits only, no separators

Email Address

tess@mulecreekgravel.com

Confirmation

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

☑ Yes