DRMS ePermitting Change of Contact

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

General Information

Submittal Date

3/14/2025

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

Glenda

Administrator Last Name

Hocker

Administrator Email

glendahocker@live.com

Select a Permit Number *

M2004063

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Hocker Construction, LLP

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Roy		Hocker

Address 1

4167 CR 321

Address 2

PO Box 627

City	State	Zip Code
Ignacio	CO	81137

Telephone #	Extension	Fax #
9707490390		
Digits only, no separators		Digits only, no separators

Email Address

glendahocker@live.com

Inspection Contact Information

Inspection Company Name

Hocker Construction, LLP

Salutation	First Name	Middle Initial	Last Name
Mr	Roy		Hocker

Address 1	Address 2
4167 CR 321, PO Box 627	PO Box 627

City	State	Zip Code
Ignacio	CO	81137

Telephone #	Extension	Fax #
9707490390 Digits only, no separators		Digits only, no separators

Email Address

glendahocker@live.com

Confirmation

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

☑ Yes