

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

3/17/2025

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)

Inspection Contact Information

Inspection Company Name

Hocker Construction, LLP

Salutation

Mr

First Name

Roy

Middle Initial

Last Name

Hocker

Address 1

4167 CR 321, PO Box 627

Address 2

PO Box 627

City

Ignacio

State

CO

Zip Code

81137

Telephone

9707490390

Digits only, no separators

Extension

Fax

Digits only, no separators

Email Address

glendahocker@live.com

Confirmation

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



Yes