DRMS ePermitting Change of Contact



General Information

Su	bmittal	l Date

6/26/2025

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		
Merial	Currier		
Administrator Email micurrier@gmail.com			
Select a Permit Number * M1980203			
Select Contact Type * Select all that apply			
✓ Permittee Contact ☐ Permitting Contact ☐ Inspection Contact ☐ Additional Annual Fee Contact(s)			

Permittee Contact Information

Permittee	Company	Name
	company	

Currier Gravel Pit, Inc.

Name change requires succession of operator application

 Salutation
 First Name
 Middle Initial
 Last Name

 Ms.
 Merial
 I
 Currier

Address 1 Address 2

P.O. Box 27059

City State Zip Code

Denver CO 802270000

Telephone # Extension Fax #

3037389440 3037389557

Digits only, no separators Digits only, no separators

Email Address

Confirmation

Have you reviewed all the information provided on this form? ${\color{red}^{\star}}$

Yes