DRMS ePermitting Change of Contact



General Information

Submittal Date

9/11/2025

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

Brennan

Middleton

Administrator Email

bmiddleton@broomfield.org

Select a Permit Number *

M2003016

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

City and County of Broomfield

Name change requires succession of operator application

Salutation First Name Middle Initial Last Name

Mr Kevin Allen

Address 1 Address 2

3951 West 144th Avenue

City State Zip Code

Broomfield CO 800230000

Telephone # Extension Fax #

7205571336

Digits only, no separators

Digits only, no separators

Email Address

kevinallen@broomfield.org

Permitting Contact Information

Permitting Company Name

City and County of Broomfield

Salutation Middle Initial **First Name Last Name**

Kevin Allen Mr

Address 1 Address 2

3951 West 144th Avenue

City State **Zip Code**

Broomfield CO 800230000

Telephone # **Extension** Fax #

7205571336

Digits only, no separators

Digits only, no separators

Email Address

kevinallen@broomfield.org

Inspection Contact Information

Inspection Company Name

City and County of Broomfield

Salutation Middle Initial **First Name Last Name**

Mr Kevin Allen

Address 2 Address 1

3951 West 144th Avenue

City State **Zip Code**

Broomfield CO 800230000

Telephone # **Extension** Fax #

7205571336

Digits only, no separators Digits only, no separators

Email Address

kevinallen@broomfield.org

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 * Middle Initial Last Name *

Mark Lorie

Annual Fee Notice Company Name

Address 1 Address 2

City State Zip Code

00000000

Telephone # Extension Fax #

Digits only, no separators Digits only, no separators

Email Address

mlorie@broomfield.org

Confirmation

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

Yes