

DRMS ePermitting Change of Contact



COLORADO

Division of Reclamation,
Mining and Safety

Department of Natural Resources

General Information

Submittal Date

9/12/2025

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

Michael

Administrator Last Name

Golliher

Administrator Email

mgolliher@petelien.com

Select a Permit Number *

M1977002HR

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Colorado Lien Company

Name change requires succession of operator application

Salutation

Mr

First Name

Michael

Middle Initial

Last Name

Golliher

Address 1

P.O. Box 440

Address 2

City

Rapid City

State

SD

Zip Code

577090000

Telephone

6053427224

Digits only, no separators

Extension

Fax

Digits only, no separators

Email Address

mgolliher@petelien.com

Permitting Contact Information**Permitting Company Name**

Pete Lien & Sons, Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Michael		Golliher

Address 1	Address 2
P.O. Box 440	

City	State	Zip Code
Rapid City	SD	577020000

Telephone #	Extension	Fax #
6053427224		
Digits only, no separators		Digits only, no separators

Email Address

mgolliher@petelien.com

Inspection Contact Information**Inspection Company Name**

Pete Lien & Sons, Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Michael		Golliher

Address 1	Address 2
P.O. Box 440	

City	State	Zip Code
Rapid City	SD	577090000

Telephone #	Extension	Fax #
6053427224		
Digits only, no separators		Digits only, no separators

Email Address

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

Ms

First Name *

Danielle

Middle Initial

Last Name *

Wiebers

Annual Fee Notice Company Name

Address 1

Address 2

City

State

Zip Code

Telephone #

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

dwiebers@petelien.com

Confirmation

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



Yes