

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

9/22/2025

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

Sara

Administrator Last Name

Weimer

Administrator Email

shaggstrom@apc.us.com

Select a Permit Number *

M1988093

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Fremont Paving & Redi-Mix, Inc.

Name change requires succession of operator application

Salutation

Mr

First Name

Tony

Middle Initial

Last Name

Majka

Address 1

839 Mackenzie Ave

Address 2

City

Canon City

State

CO

Zip Code

81212

Telephone

7192753264

Digits only, no separators

Extension

Fax

7192758897

Digits only, no separators

Email Address

tony.majka@unitedco.com

Permitting Contact Information**Permitting Company Name**

Oldcastle SW Group, Inc. dba United Companies

Salutation	First Name	Middle Initial	Last Name
Ms	Sara		Weimer

Address 1	Address 2
839 Mackenzie Ave.	

City	State	Zip Code
Cañon City	CO	81212

Telephone #	Extension	Fax #
7192753264		
Digits only, no separators		Digits only, no separators

Email Address

Shaggstrom@apc.us.com

Inspection Contact Information**Inspection Company Name**

Oldcastle SW Group, Inc. dba United Companies

Salutation	First Name	Middle Initial	Last Name
Ms	Sara		Weimer

Address 1	Address 2
839 Mackenzie Ave	

City	State	Zip Code
Cañon City	CO	81212

Telephone #	Extension	Fax #
7192753264		
Digits only, no separators		Digits only, no separators

Email Address

Shaggstrom@apc.us.com

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 *

Tony

Majka

Annual Fee Notice Company Name

Address 1

Address 2

City

State

Zip Code

Telephone #

Extension

Fax #

Digits only, no separators

Digits only, no separators

Email Address

tony.majka@unitedco.com

Remove Existing Contact?

☐ Remove

Salutation

First Name *

Middle Initial

Last Name *

Sara

Weimer

Annual Fee Notice Company Name

Address 1

Address 2

City

State

Zip Code

Telephone #

Extension

Fax #

Digits only, no separators

Digits only, no separators

Email Address

Shaggstrom@apc.us.com

Confirmation

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

☒ Yes