

DRMS ePermitting Change of Contact



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

General Information

Submittal Date

9/24/2025

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

Timothy

Administrator Last Name

Smith

Administrator Email

timothy.smith@amrize.com

Select a Permit Number *

M1977344

Select Contact Type *

Select all that apply

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

Permittee Contact Information

Permittee Company Name

Holcim (US) Inc.

Name change requires succession of operator application

Salutation

Mr

First Name

Timothy

Middle Initial

Last Name

Smith

Address 1

3500 Highway 120

Address 2

City

Florence

State

CO

Zip Code

812260000

Telephone

7192807975

Digits only, no separators

Extension

Fax

7197842205

Digits only, no separators

Email Address

timothy.smith@amrize.com

Permitting Contact Information**Permitting Company Name**

Amrize Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Timothy		Smith

Address 1	Address 2
3500 Highway 120	

City	State	Zip Code
Florence	CO	812260000

Telephone #	Extension	Fax #
7192807975		7197842205
Digits only, no separators		Digits only, no separators

Email Address

timothy.smith@amrize.com

Inspection Contact Information**Inspection Company Name**

Amrize Inc.

Salutation	First Name	Middle Initial	Last Name
Mr	Timothy		Smith

Address 1	Address 2
3500 Highway 120	

City	State	Zip Code
Florence	CO	812260000

Telephone #	Extension	Fax #
7192807975		7197842205
Digits only, no separators		Digits only, no separators

Email Address

timothy.smith@amrize.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 *

Shad

Middle Initial

Last Name *

Shapiro

Annual Fee Notice Company Name

Amrize Inc.

Address 1

Address 2

City

State

Zip Code

000000000

Telephone #

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

Shad.Shapiro@holcim.com

Confirmation

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



Yes