



JOSEPHINE COUNTY SHERIFF'S OFFICE

CONCEALED HANDGUN

ADDRESS CHANGE/REPLACEMENT

ORS 166.295(2) requires that if a licensee changes residence, the licensee shall report the change of address and the sheriff shall issue a new license as duplication for a change of address. At the time you submit your application for change of address you may be photographed and a \$15.00 *cash* fee will be collected. These fees are non-refundable and cover the cost of the processing as required by law.

If you have moved to Josephine County from another Oregon county you will need to be photographed and fingerprinted.

FIRST NAME MIDDLE (FULL) LAST NAME

OTHER NAMES USED (AKA, MAIDEN, ALIAS, ETC)

____ / ____ / ____
BIRTH DATE DRIVER'S LIC # EXPIRATION YEAR

____ / ____ / ____
SOCIAL SECURITY NUMBER PLACE OF BIRTH: STATE OR FOREIGN COUNTRY
(Disclosure of your SSN is voluntary. Solicitation of the number is authorized Under ORS 166.420. It will only be used As a means of identification.) **If you were born in a foreign country, you must provide proof of citizenship or naturalization. Exceptions are if you were born in a US Territory.*

SEX: _____ RACE: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

CURRENT RESIDENCE ADDRESS CITY STATE ZIP

MAILING (IF DIFFERENT THAN STREET ADDRESS) CITY STATE ZIP

HOME/CELL PHONE NUMBER WORK/OTHER PHONE NUMBER

LIST ALL STATES YOU LIVED IN AS AN ADULT INCLUDING MILITARY BASES

REASON FOR REPLACEMENT (MOVED, LOST, MARRIED, ETC)

***** DO NOT WRITE BELOW OFFICE USE ONLY*****

RECEIVED BY: _____ DATE: _____

CHL#: _____ EXPIRATION DATE: _____