

**APPLICATION FOR A DUPLICATE LICENSE**

**APPOINTMENT NECESSARY CALL 435-2037**

The Total Fee for a Duplicate Pistol License is **\$8.00**

DATE: \_\_\_\_\_

I, \_\_\_\_\_ currently reside at \_\_\_\_\_

\_\_\_\_\_. Occupation: \_\_\_\_\_  
(City and State and Zip Code)

Employer: \_\_\_\_\_, SSN: # \_\_\_\_\_ DOB: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ (City & State)

Height: \_\_\_\_\_, Weight: \_\_\_\_\_, Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Phone Number : \_\_\_\_\_ Work Number: \_\_\_\_\_

License Number: \_\_\_\_\_, Date Issued: \_\_\_\_\_ Citizenship: \_\_\_\_\_

**Do hereby make application for a duplicate license for the following weapons:**

<b>MAKE</b>	<b>CALIBER</b>	<b>SERIAL #</b>	<b>MODEL</b>	<b>REV/AUTO</b>
-------------	----------------	-----------------	--------------	-----------------


The reason I am requesting this duplicate license is because \_\_\_\_\_

**I hereby certify that the above information is true and that I have not been confined to a mental institution or been arrested, indicted or convicted of any offense since the license was issued.**  
(If so, please give specifics on back of form)

**SIGNATURE OF APPLICANT**  
**REVISED 01-21-10**

**No photo needs to be provided. All photos and info is generated via a computer program.**