

At this time due to COVID- 19 building closures at the Onondaga County Sheriff's Office, the following Pistol License Unit transactions can be completed via mail.

NYS Firearms License Amendment Form to:

- Acquire a Weapon (No Joint Use Forms will be accepted at this time)
- Dispose of a Weapon (If the weapon was Joint Use with another License holder then **both** License holders must provide the necessary forms)
- Address Change **ONLY** within ONONDAGA County

This applies **ONLY** to Permit holders that have been issued a plastic License Card with a **RED** overlay on the card. The following would be in RED: LIC #, Licensee's Name & the word RESTRICTIONS.

* The following Licenses **CANNOT** be updated via mail: Green Paper License or a plastic License Card that has a **BLUE** overlay with the State Seal (The following would be in BLUE: State of New York, County of Onondaga). Sorry for the inconvenience. If you have this type of License it is a good time to start the process to update to a Duplicate License. The "Application for Duplicate License Form" is available on line which will be processed when normal operations are resumed.

SEE BELOW FOR INSTRUCTIONS ON EACH ITEM NOTED ABOVE. Note any errors and or omissions in submitted paperwork will delay the processing of the request. Please make sure to read each item carefully and follow ALL directions. All correspondence should include contact information in case follow up is needed, i.e. phone number and/or email address.

Please follow the following steps to process a NYS Amendment to Acquire a weapon:

No Joint Use will be accepted at this time.

No immediate family member transactions allowed at this time.

The following items **MUST** be sent to the Onondaga County Sheriff's Office Pistol License Unit @ 407 S. State Street, Syracuse, NY 13202:

Issued Pistol License card of the holder (Not a Copy) ** (Please maintain a copy for your records)

Copy of Receipt from the Federal Firearms Licensed Dealer, the receipt MUST state "Paid In Full".

NYS Firearms License Amendment Form filled out, including Signature (ALL HIGHLIGHTED areas are required items – See form below). **All information must be legible.**

Self-Addressed Stamped Envelope to return new license to Licensee as well as Coupon for the Dealer

****During this time until you receive your new license you cannot practice your Pistol License rights.**

STATE OF NEW YORK
PISTOL / REVOLVER LICENSE AMENDMENT

NYSID # _____

Date: _____

Amendment form for (check one):

☒ **ONONDAGA** County License OR ☐ New York State Police Pistol License

Name	Date of Birth	NY Driver's License No. (or NY Non-Driver ID No.)
Physical Address (street, city, state, zip)		
Mailing Address (if different)		

Pistol License Number Duplicate License Number _____ Transfer License Number _____ Transferred From _____	Date Issued Date Issued _____ Date Issued _____ Transferred To _____
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TRANSACTION TYPE(S) (Check all that apply):
☐ **Acquired**
☐ Address Change
☐ Deceased
☐ Disposed
☐ Duplicate
☐ Lost / Stolen Firearm
☐ Name Change
☐ Revoked
☐ Surrendered
☐ Suspended
☐ Transfer
☐ Other _____
AMEND LICENSE FOR THE FOLLOWING

1. New Name _____
2. New Physical Address _____
3. New Mailing Address (If different) _____
4. **Following Weapon(s) Acquired From: (Name, Address)** _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

5. **Following Weapon(s) Disposed to: (Name, Address)** _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

6. **Following Weapons(s) has been:**
☐ Lost
☐ Stolen
☐ Destroyed

Law Enforcement Agency Reported To: _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

Have you been arrested, indicted, or convicted of any criminal offense, been the subject of an order of protection, or been a patient at any mental institution since the above license was issued?
☐ **Yes**
☐ **No**
 If **Yes**, give details on reverse.

 Licensing Officer

Signature of Licensee

Please follow the following steps to process a NYS Amendment to Dispose of a weapon:

No immediate family member transactions allowed at this time.

If the weapon being disposed was Joint Use with another Onondaga County License holder then both Onondaga County Licensees **MUST** follow the directions below.

The following items **MUST** be sent to the Onondaga County Sheriff's Office Pistol License Unit @ 407 S. State Street, Syracuse, NY 13202:

Issued Pistol License card of the holder (Not a Copy) ** (Please maintain a copy for your records)

Copy of Receipt from the Federal Firearms Licensed Dealer

NYS Firearms License Amendment Form filled out, including Signature (ALL HIGHLIGHTED areas are required items – See form below). **All information must be legible.**

Self-Addressed Stamped Envelope to return new license to Licensee

****During this time until you receive your new license you cannot practice your Pistol License rights.**

STATE OF NEW YORK
PISTOL / REVOLVER LICENSE AMENDMENT

NYSID # _____

Date: _____

Amendment form for (check one):

☒ **ONONDAGA** County License OR ☐ New York State Police Pistol License

Name	Date of Birth	NY Driver's License No. (or NY Non-Driver ID No.)
Physical Address (street, city, state, zip)		
Mailing Address (if different)		

Pistol License Number _____ Duplicate License Number _____ Transfer License Number _____ Transferred From _____	Date Issued _____ Date Issued _____ Date Issued _____ Transferred To _____
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TRANSACTION TYPE(S) (Check all that apply):

☐ Acquired
 ☐ Address Change
 ☐ Deceased
 ☒ **Disposed**
 ☐ Duplicate
 ☐ Lost / Stolen Firearm
 ☐ Name Change
☐ Revoked
☐ Surrendered
☐ Suspended
☐ Transfer
☐ Other _____

AMEND LICENSE FOR THE FOLLOWING

1. New Name _____
2. New Physical Address _____
3. New Mailing Address (If different) _____
4. Following Weapon(s) Acquired From: (Name, Address) _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

- 5.
- Following Weapon(s) Disposed to: (Name, Address)**
- _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

6. Following Weapons(s) has been:
- ☐
- Lost
- ☐
- Stolen
- ☐
- Destroyed

Law Enforcement Agency Reported To: _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

Have you been arrested, indicted, or convicted of any criminal offense, been the subject of an order of protection, or been a patient at any mental institution since the above license was issued? ☐ **Yes** ☐ **No** If **Yes**, give details on reverse.

Licensing Officer_____
Signature of Licensee

Please follow the following steps to process a NYS Amendment to do an Address Change within Onondaga County:

The following items **MUST** be sent to the Onondaga County Sheriff's Office Pistol License Unit @ 407 S. State Street, Syracuse, NY 13202:

Issued Pistol License card of the holder (Not a Copy) ** (Please maintain a copy for your records)

Copy of your updated NYS Driver's License/NYS Non-Driver's License showing the Address Change

NYS Firearms License Amendment Form filled out, including Signature (ALL HIGHLIGHTED areas are required items – See form below). **All information must be legible.**

Note the Physical Address listed in the top section on the form is the address noted on your currently issued License Card. The "New Physical Address" is the address of your new residence that you have moved to that matches your updated NYS Driver's License/NYS Non-Driver's License.

Self-Addressed Stamped Envelope to return new license to Licensee

****During this time until you receive your new license you cannot practice your Pistol License rights.**

STATE OF NEW YORK
PISTOL / REVOLVER LICENSE AMENDMENT

NYSID # _____

Date: _____

Amendment form for (check one):

☒ **ONONDAGA** County License OR ☐ New York State Police Pistol License

Name	Date of Birth	NY Driver's License No. (or NY Non-Driver ID No.)
Physical Address (street, city, state, zip)		
Mailing Address (if different)		

Pistol License Number _____ Duplicate License Number _____ Transfer License Number _____ Transferred From _____	Date Issued _____ Date Issued _____ Date Issued _____ Transferred To _____
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TRANSACTION TYPE(S) (Check all that apply):

☐ Acquired
 ☐ **Address Change**
 ☐ Deceased
 ☐ Disposed
 ☐ Duplicate
 ☐ Lost / Stolen Firearm
 ☐ Name Change
☐ Revoked
 ☐ Surrendered
 ☐ Suspended
 ☐ Transfer
 ☐ Other _____

AMEND LICENSE FOR THE FOLLOWING

1. New Name _____
2. **New Physical Address** _____
3. **New Mailing Address (If different)** _____
4. Following Weapon(s) Acquired From: (Name, Address) _____

Manufacturer	Pistol / Revolver / Single Shot *	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

5. Following Weapon(s) Disposed to: (Name, Address) _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

6. Following Weapons(s) has been: ☐ Lost ☐ Stolen ☐ Destroyed

Law Enforcement Agency Reported To: _____

Manufacturer	Pistol / Revolver / Single Shot	Model	Frame Only	Caliber(s)	Serial Number
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

Have you been arrested, indicted, or convicted of any criminal offense, been the subject of an order of protection, or been a patient at any mental institution since the above license was issued? ☐ **Yes** ☐ **No** If **Yes**, give details on reverse.

Licensing Officer_____
Signature of Licensee