VIRGINIA CONCEALED HANDGUN PERMIT

CHANGE OF ADDRESS NOTIFICATION AND REQUEST FOR REPLACEMENT PERMIT

Permit Holder Name (First, Middle, Last)				Permit Number	
Issued By (Name of Court)		Issue	Date	Expiration Date	
	OLD ADDRESS	<u> </u>			
Street Address or Rural Route					
City	State	Zip	County		
	NEW ADDRESS	6			
Street Address or Rural Route					
City	State	Zip	County		
I hereby request a replacement Vi	rginia Concealed Handgı	un Permit.			
	Permi	Permit Holder's Signature			
	Date				

Pursuant to Section 18.2-308.011 (A) of the Code of Virginia, the clerk of the circuit court that issued a valid concealed handgun permit shall, upon presentation by the permit holder of the valid permit and completion of State Police Form SP-248A, issue a replacement permit specifying the permit holder's new address.

This form may be downloaded and printed from the State Police website at www.vsp.virginia.gov/FormsPublications.shtm

This form shall be utilized for change of address purposes only.