

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**_____
Street Address or Rural Route_____
City_____
State_____
Zip_____
County**NEW ADDRESS**_____
Street Address or Rural Route_____
City_____
State_____
Zip_____
County

I hereby request a replacement Virginia Concealed Handgun Permit.

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.