Replacement Weapons Carry License Affidavit

| I | (Name on Original Weapons Carry License), am requesting a |
|--|---|
| replacement Weapons Carry Lice | ense for the following reason(s): |
| Within the last 48 hours r | my license was lost or stolen, or discovered to be lost or stolen |
| My license is damaged | |
| I never received my licens | se in the mail |
| I need to change the name | on my license to: |
| I need to change the addre | ess on my license to: |
| Issued identification which show | on license issued by Troup County: The Applicant must provide a State- state Applicant's new name and/or new address. The updated license will not the prior license is surrendered to the Probate Court. The fee is \$6.00 cash or |
| | The updated license will not be issued to the Applicant until the damaged pate Court. The fee is \$6.00 cash or check. |
| For licenses that were lost, stol check. The fee is \$7.00 cash or c | en, or never received: The Probate Court will conduct an updated background heck. |
| The following information is nee | eded to process this request: |
| Date of Birth: | |
| State and Country of Birth: | |
| Sex: Race: | Height: Weight: |
| Ι, | hereby swear or affirm that all the above information is true and |
| correct to the best of my knowled | dge and understand I will be charged a reprint fee. |
| Sworn to and subscribed before | |
| me this day of | , 20 |
| Deputy Clerk of Probate Court | |
|) | Probate Court Use Only |
| License #: | New or Updated Weapons Carry License # was |
| Mailed on | |
| Picked up | |