## **Carry Concealed Weapons Permit Duplicate Request**

	Permit Number:			
Fee: \$15.00 (Include copy of current Driver's License)		Paid: Cash Credit Debit Check  Date received by or mailed to applicant:		
NAME:				
BIRTHDATE:	PHONE:			
NEW PHYSICAL ADDRESS:				
	CITY	STATE	ZIP	
NEW MAILING ADDRESS:				
	CITY	STATE	ZIP	
NRS 202.367 Duplicate permit; notification to sheriff of the Apermittee shall notify the sheriff who issued his of (a) Permanent address changes; or (b) Permit is lost, stolen or destroyed.  2. The sheriff shall issue a duplicate permit to a permit (a) Submits a written statement to the sheriff, signed un (b) Pays a nonrefundable fee of \$15.  3. If any permittee subsequently finds or recovers hermittee shall, within 10 days: (a) Notify the sheriff in writing; and (b) Return the duplicate permit to the sheriff.  4. A permittee who fails to notify a sheriff pursuant to (Added to NRS by 1995, 2724)	ttee if the permittee: der oath, stating that his or her permit his or her permit after being issued	it has been lost, stol a duplicate permit	en or destroyed; and	
UNDER PENALTY OF PERJURY, I DO HE PROVIDED IS TRUE AND CORRECT TO			HE INFORMA	TION
XSIGNATURE OF PERMIT HOLDER	DATE:			
-				
X	DATE:			

SHERIFF'S EMPLOYEE