

Replacement Weapons Carry License Affidavit

I _____ (Name on Original Weapons Carry License), am requesting a replacement Weapons Carry License for the following reason(s):

_____ Within the last 48 hours my license was lost or stolen, or discovered to be lost or stolen

_____ My license is damaged

_____ I never received my license in the mail

_____ I need to change the name on my license to: _____

_____ I need to change the address on my license to: _____

For changes to name/address on license issued by Cherokee County: The Applicant must provide a State-Issued identification which shows the Applicant's new name and/or new address. The updated license will not be issued to the Applicant until the prior license is surrendered to the Probate Court.

For licenses that are damaged: The updated license will not be issued to the Applicant until the damaged license is surrendered to the Probate Court.

For licenses that were lost, stolen, or never received: The Probate Court will conduct an updated background check. The following information is needed to process this request:

Date of Birth: _____

State and Country of Birth: _____

Sex: _____ Race: _____ Height: _____ Weight: _____

I, _____, hereby swear or affirm that all the above information is true and correct to the best of my knowledge and understand I will be charged a reprint fee.

Sworn to and subscribed before me
this _____ day of _____, 20_____.

Deputy Clerk of Probate Court

Signature of Affiant

Probate Court Use Only

Case Number: _____

New or Updated Weapons Carry License was

_____ Mailed on _____

_____ Picked up on _____