



CALIFORNIA DEPARTMENT OF JUSTICE BUREAU OF FIREARMS



MODIFICATION OF LICENSE TO CARRY CONCEALED FIREARM

Note: Do not use this form to change CCW type (i.e., resident, judicial, reserve police officer, employment). You may change CCW type upon issuance of a renewal CCW license, or submit a new CCW application prior to expiration of existing CCW term.

LICENSE DATA:

AGENCY	ORI
LICENSEE	DOB
CII#	LOCAL #
DATE OF ISSUE	DATE OF MODIFICATION

REASON FOR CORRECTION:

NAME CHANGE:

LAST	FIRST	MIDDLE
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RESIDENCE ADDRESS CHANGE:

NUMBER AND STREET		
CITY	COUNTY	ZIP CODE

FIREARMS CORRECTIONS:

ADD	DELETE	MANUFACTURER	SERIAL NUMBER	CALIBER	MODEL	TYPE

MAIL TO:

DEPARTMENT OF JUSTICE
ATTN: FIREARMS - CCW
P.O. BOX 981118
W. SACRAMENTO, CA 95798-1118

"I DECLARE UNDER PENALTY OF PERJURY (SECTIONS 126 and 672 PC) THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION ARE TRUE AND COMPLETE"

SIGNATURE OF APPLICANT

DATE