

Larimer County Sheriff's Office CHP NAME CHANGE FORM

WARNING: The information you provide will be verified. Providing false information on this application constitutes a criminal offense for which you may be prosecuted. Print or type all information except signatures.

Name change only <input type="checkbox"/>		Permit #: _____		No Charge/No Fee	
Name and address change <input type="checkbox"/>					
New Name (Last, First and Middle):					
Previous Name (Last, First and Middle):					
Colorado DL#/Colorado ID#/Military Order:					
Date of Birth:	*Social Security Number:	Colorado County of Residence:	EMAIL:		
Current Home Address:			City / State / Zip:		
Length of Time at Current Address:		Home Phone - (area code + phone):		Daytime Phone - (area code + phone):	
Mailing Address if different from above:					
Previous Address:					

NOTE TO RECIPIENT: A PHOTOCOPY REPRODUCTION OF THIS SIGNED REQUEST SHALL BE FOR ALL INTENTS AND PURPOSES AS VALID AS THE ORIGINAL. YOU MAY RETAIN THIS FORM IN YOUR FILES. THE ORIGINAL OF THIS FORM WILL REMAIN IN THE SHERIFF'S OFFICE CONCEALED HANDGUN PERMIT FILES.

Permitee's notarized signature _____

Subscribed and sworn before me this ____ day of _____, _____.

Witness my hand and official seal _____
Notary Public

My commission expires: _____

For Internal Use Only

- Photocopy of Marriage/Divorce/Name Change document, or updated CO Driver's License.
- Name Change fingerprint card **CRS 13-15-101**. Print and give to CHP Specialist.
- Given updated permit? Yes No, please mail.