

CLERMONT COUNTY SHERIFF'S OFFICE

Robert S. Leahy, Sheriff
"Committed to Excellence"

Concealed Carry License Name and/or Address Change Notification

I am in possession of a Concealed Handgun License issued by the Clermont County Sheriff's Office;

Effective _____ my **new address** is:
Date

Street Address	City	State	Zip	County

	13 - CLE -		
Name (as printed on CCW license)	CCW License Number	Date of Birth	Last 2 Digits of SS #

Effective _____ my **new name** is:

(Please provide a copy of your driver's license and/or state identification to verify name change)

PRINT - New Last Name	PRINT - First Name	PRINT - Middle Name

	13 - CLE -		
Name (as printed on CCW license)	CCW License Number	Date of Birth	Last 2 Digits of SS #

Note: it is recommended for a name change that you promptly obtain an updated Concealed Handgun License card to match your driver's license at our office by paying a fee of \$15.00 (exact change).

Please include a contact phone number for any questions that may arise: _____

Please note that you will not receive confirmation of this change.

IMPORTANT INFORMATION IF MOVING OUT OF OHIO:

If you move from the State of Ohio, your concealed carry license remains valid until it expires, however your license **cannot** be renewed unless you re-establish residency OR provide proof of employment in Clermont County or an adjacent county.

Signature

Date

Please complete all fields of this form and mail or fax to:

Clermont County Sheriff's Office
Attn: Concealed Carry License
4470 State Route 222 Batavia, Ohio 45103
Fax: (513) 732-7515