REQUEST FOR A REPLACEMENT CONCEALED HANDGUN PERMIT
COMMONWEALTH OF VIRGINIA - § 18.2-308.011

Permit #:_____

To The Rockingham County Circuit Court:

I, _____, hereby request that this court issue me a replacement permit to carry a concealed handgun. In support of this request, I state under oath the following information:

☐ permit was lost or destroyed

or

☐ my name has legally changed (attach documentation as proof of name change):

_____ to _____
Name on Current Permit — New Full Legal Name

_____
Signature

State of _____ City/County of _____,to-wit:

Subscribed and sworn to before me this ____ day of _____, 20_____.

_____
[ ] CLERK [ ] DEPUTY CLERK [ ] NOTARY PUBLIC

My Commission Expires:_____

Registration No.: _____