

**REQUEST FOR DUPLICATE PERMIT
TO CARRY A CONCEALED HANDGUN**
COMMONWEALTH OF VIRGINIA

Permit Number: _____

To the Circuit Court of _____

I, _____, hereby request that this court
NAME
 Issue to me a duplicate permit to carry a concealed handgun. In support of this request, I state under oath
 the following information and make the following representations:

1. My current address and telephone number are: _____
TELEPHONE NUMBER

ADDRESS

2. I received a permit to carry a concealed handgun from this court on or about _____
DATE

3. I am not currently subject to any condition described in Virginia Code §18.2-308.09
 which would disqualify me from having a permit to carry a concealed handgun.

4. I am not currently subject to a protective order issued by a court.

5. I have not been ordered by a court issuing a protective order to surrender my permit to carry a
 concealed handgun pursuant to Virginia Code §18.2-308.1:4. I understand that failure to surrender
 a permit to carry a concealed handgun while subject to a protective order is a Class 1
 misdemeanor.

6. I request a duplicate permit to carry a concealed handgun because: _____

ATTACHED ADDITIONAL SHEET(S)

I further certify under oath that this duplicate permit to carry a concealed handgun is not sought for any
 fraudulent purposes and that the information I have given is true to the best of my knowledge and belief.

_____ DATE _____ SIGNATURE

Commonwealth/State of _____
 City County of _____

Subscribed and sworn to/affirmed before me on this date by the above-named person.

_____ DATE _____
 CLERK Deputy Clerk
 Notary Public My commission expires _____
 Notary Registration Number: _____