

CONCEALED FIREARM PERMIT

ADDRESS CHANGE FORM

Per Wyoming Concealed Firearm Statute, W.S. 6-8-104(o) Within thirty (30) days after the changing of a permanent address the permittee shall notify the division. Violation of this subsection may result in cancellation or revocation of the permit.

Please mail form to:

**DIVISION OF CRIMINAL INVESTIGATIONS – CFP
STATE OF WYOMING
208 S. College Drive
Cheyenne, WY 82002-0150**

You may also fax form to: (307) 777-7301 Attention: Concealed Firearm Permits

PRINT NAME: _____

TELEPHONE # _____ - _____ - _____

PERMIT# _____

OLD ADDRESS: _____

NEW ADDRESS: _____

SIGNATURE: _____

DATE: _____