

**VIRGINIA CONCEALED HANDGUN PERMIT  
CHANGE OF ADDRESS NOTIFICATION AND REQUEST FOR REPLACEMENT PERMIT**

\_\_\_\_\_  
**Permit Holder Name** (First, Middle, Last) **Permit Number**

\_\_\_\_\_  
**Issued By** (Name of Court) **Issue Date** **Expiration Date**

<b>OLD ADDRESS</b>			
Street Address or Rural Route			
City	State	Zip	County

<b>NEW ADDRESS</b>			
Street Address or Rural Route			
City	State	Zip	County

I hereby request a replacement Virginia Concealed Handgun Permit.

\_\_\_\_\_  
**Permit Holder's Signature**

\_\_\_\_\_  
**Date**

Pursuant to Section 18.2-308.011 (A) of the Code of Virginia, the clerk of the circuit court that issued a valid concealed handgun permit shall, upon presentation by the permit holder of the valid permit and completion of State Police Form SP-248A, issue a replacement permit specifying the permit holder's new address.

This form may be downloaded and printed from the State Police website at  
[www.vsp.virginia.gov/FormsPublications.shtm](http://www.vsp.virginia.gov/FormsPublications.shtm)

This form shall be utilized for change of address purposes only.