Address Change Form for Concealed Handgun License
Umatilla County Sheriff's Office
Terry L. Rowan

Civil Division • 4700 NW Pioneer Place • Pendleton, OR 97801 • (541) 966-3680 • www.co.umatilla.or.us

SHORT FORM for ADDRESS CHANGE within UMATILLA COUNTY – No appointment needed.

First (Full Legal Name) **Full Middle** **Last**

Current RESIDENTIAL Street Address MAILING ADDRESS

______________________________ ______________________________

Numbers and Street Name

______________________________ ______________________________

City State Zip Code City State Zip Code

Date of Birth: ________________Driver's License #: ______________________ State: ____

Phone #______________________ Email Address (optional) ________________________

PRIOR ADDRESSES – List ALL resident addresses for the past three years: (use back of paper if more room is needed):

Address:__________________ City:______________ State: _________ Zip Code:_______

Initial	
☐	I have read the entire text of and understand this application, and the statements therein are correct and true. I further understand that making false statements on this application is a **MISDEMEANOR** crime, and that I am subject to prosecution and automatic denial or revocation. All payments are non-refundable.

Signature of Applicant: ________________________________ **Date Signed**: ____________

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PROOF OF IDENTIFICATION: (2 pieces of current I.D. are required, 1 must be Government issued with Photo)

PHOTO ID # 1 Type __________________ **Number:** ________________ **Exp**______

ID #2 Type ______________________ **Number:** ________________ **Exp** ______

APPLICATION TYPE: ☐ADDRESS CHANGE $15 ☐DUPLICATE $15