



TRANSFER REQUEST FORM

I, _____ (*Name*), am requesting the transfer of all my pistol permit records, currently on file at the Orleans County Pistol Permit Office, **to be transferred to the County of** _____.

Permit Carry #: _____

Original Date of Issue of Permit: _____

NYS Driver's License ID # _____

Date of Birth: _____

My Previous Address in Orleans County:

My New Address:

Home/Cell Phone #: __(__)_____

The following gun(s) are currently registered on my permit:

MAKE	CALIBER	SERIAL #	MODEL	TYPE

DATED: _____, 20_____

Signature