



ARKANSAS STATE POLICE

Concealed Handgun Carry License Add Enhanced Endorsement to Replacement License Request Form

PLEASE TYPE OR PRINT LEGIBLY

(Not required for **New or Renewal applications** to add Enhanced Endorsement)

Name: _____
LAST FIRST MIDDLE

Arkansas Concealed Handgun Carry License #: _____ Exp date: _____

Date of Birth: _____ Arkansas driver's license number: _____

Physical address: _____
(STREET)

_____, _____, AR _____
(CITY) (COUNTY) (ZIP CODE)

Mailing address: _____
(P. O. BOX #, ETC.)

_____, _____, AR _____
(CITY) (COUNTY) (ZIP CODE)

Daytime telephone number: (____) _____ E-mail address: _____

NOTICE: Knowingly providing false information on this form is against Ark. Code Ann §5-73-305. By completing this form, the applicant swears or affirms that he/she is in compliance with all the qualifications to hold an Arkansas concealed handgun carry license pursuant to Ark Code Ann §5-73-301 et seq. and any other state and federal law.

I hereby state under oath that the representations made herein are true and correct and that **I will destroy my basic Concealed Handgun Carry License upon receipt of my Enhanced Concealed Handgun Carry License.**

Signature of Applicant: _____ Date: _____
(First/MI/Last Name) (Month/Day/Year)

This form **MUST** be notarized before submittal to the Arkansas State Police.

State of Arkansas, County of _____. Subscribed and sworn before me a notary public in and for the county aforesaid this _____ day of _____, 20____.

Notary Public Signature: _____ My commission expires: _____

YOU MUST ENCLOSE THE FOLLOWING WITH THIS REQUEST:

1. This properly completed form;
2. A properly completed Enhanced Concealed Handgun Carry License Training Form dated within the previous six (6) months; and
3. a. If you are 64 years of age or younger - A check or money order for **\$15.00** payable to the Arkansas State Police **OR**;
b. If you are 65 years of age or older - A check or money order for **\$7.50** payable to the Arkansas State Police.

Mail your request packet to: **Arkansas State Police, CHCL Section, 1 State Police Plaza Drive, Little Rock, AR 72209**