WARREN COUNTY SHERIFF'S OFFICE
SHERIFF LARRY L. SIMS

CONCEALED CARRY LICENSE ADDRESS CHANGE NOTIFICATION

I am in possession of a Concealed Handgun Permit issued by the Warren County Sheriff's Office.

Effective _____, my new address is:

_____
Street Address City State Zip

_____
Name (as printed on license) License Number Date of Birth

_____
Signature Date

Please complete all fields on this form, and mail to:
Warren County Sheriff's Office
Attn: Concealed Carry License
822 Memorial Dr.
Lebanon, OH 45036