

## **Reason for Request**

Please check the appropriate box, which identifies the change you are requesting to be made on your North Dakota Concealed Weapon License. There is no charge for a new license.			
Address Change (within North Dakota) - you are not required to get an updated license for a change of address. As long as you have notified the BCl of your change of address, your license is valid even if it has your old address listed. If you would like a new license to reflect this change, please return your old license.			
Address Change (out of state) - if your new state of residence has reciprocity with North Dakota, submit the following:			
Copy of your driver's license from the state in which you now reside;			
Copy of a valid concealed carry license from your new state of residence; and			
Return North Dakota Concealed Weapon License - a new license will be issued once all items are received.			
☐ Lost/Stolen/Destroyed.			
☐ Name Change - by law, your license must show your current name. Submit the following:			
Court document reflecting name change (does not have to be certified), or a copy of driver's license that shows your new name; and			
Return North Dakota Concealed Weapon License.			
Error (ND Concealed Weapon License must be returned)			
□ Other			
Full Legal Name Previous Name (if requesting a name change)			
Previous Name (if requesting a name change)			
Telephone Number	Effective	Date of Change	
City	State	ZIP Code	
City	State	ZIP Code	
City	State	ZIP Code	
Signature		Date	
	et an updated license for a change of addren if it has your old address listed. If you reciprocity with North Dakota, submit the side; esidence; and se will be issued once all items are received. Submit the following: ertified), or a copy of driver's license that set of the previous Name (if requesting a name change). Telephone Number  City  City	et an updated license for a change of address. As I en if it has your old address listed. If you would like reciprocity with North Dakota, submit the following: side; esidence; and se will be issued once all items are received.  E. Submit the following: ertified), or a copy of driver's license that shows you relephone Number  Previous Name (if requesting a name change)  Telephone Number  Effective  City  State  City  State  City  State	

For security reasons, we can only accept a change request by mail. If you want confirmation that the BCI received your request, please send certified mail with a return receipt as we are unable to release information over the phone. We do not send a notification that your change was received/updated.

Please allow 2-3 weeks for this request to be processed.

Submit the signed and dated form to:

BCI-CWL PO BOX 1054 Bismarck ND 58502

Telephone: (701) 328-5523

Website: www.attorneygeneral.nd.gov