

New Mexico Department of Public Safety

CONCEALED HANDGUN LICENSE REPLACEMENT CARD APPLICATION TYPE or PRINT LEGIBLY IN INK.

Your application will not be processed unless all application questions have been answered and all required documents have been submitted. FOR ANY LICENSE CHANGES, THE CURRENT CARD MUST BE SURRENDERED WITH APPLICATION AND \$10.00 FEE. See NMAC 10.8.2.18 and NMAC 10.8.2.19(A)(4).

FEES ARE NON-REFUNDABLE

10.8.2.19 REPLACEMENT LICENSE:

A. Change of name address, or status: A licensee who changes his or her name, address or law enforcement status shall file within 30 days:

- 1) an application for a replacement license on the form prescribed by the department;
- 2) if applicable, a certified copy of a legal document proving the change of name;
- 3) a nonrefundable \$10 processing fee; and
- 4) if applicable, proof of reemployment with a law enforcement agency.

B. Loss, theft, or destruction of license: A licensee who loses his or her license or whose license is stolen or destroyed shall file a police report within 10 days of the date the licensee discovers the loss, theft, or destruction of the license. The licensee shall not carry a concealed handgun until he or she obtains a replacement license. A licensee who seeks to replace a license that is lost, stolen, or destroyed shall file with the department:

- 1) an application for a replacement license on the form prescribed by the department;
- 2) the case number of the police report;
- 3) a notarized statement made under oath that the license was lost, stolen or destroyed; and
- 4) a nonrefundable \$10 processing fee.

The department shall issue a replacement license within 10 days of receipt of the application.

[10.8.2.19 NMAC - Rp, 10.8.2.19 NMAC, 11-30-16

FOLLOW THE CHECKLIST BELOW FOR YOUR APPROPRIATE CATEGORY BEFORE SUBMITTING YOUR REPLACEMENT CARD APPLICATION TO THE DEPARTMENT

INCOMPLETE REPLACEMENT CARD APPLICATIONS WILL NOT BE ACCEPTED

Documents needed for a **Lost License**

- Replacement Card Application
- Notarized statement about lost license
- Copy of police report or case number
- \$10.00 Fee

Documents needed for a **Stolen License**

- Replacement Card Application
- Notarized statement about stolen license
- Copy of police report or case number
- \$10.00 Fee

Documents needed for a **Destroyed License**

- Replacement Card Application
- Notarized statement about destroyed license
- Copy of police report or case number
- \$10.00 Fee

Documents needed for a **Change of Address**

- Replacement Card Application
- Proof of address change (utility bill, lease, etc.)
- \$10.00 Fee

Documents needed for a **Change of Name**

- Replacement Card Application
- Name change documents
- \$10.00 Fee

Documents needed for an **Endorsement**

- Replacement Card Application
- Training Certificate from DPS-Approved Instructor
- \$10.00 Fee

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See NMAC 10.8.2.18 and NMAC 10.8.2.19(A)(4).

FEES ARE NON-REFUNDABLE

<input type="checkbox"/> Change of Address <input type="checkbox"/> Change of Name <input type="checkbox"/> Lost / Stolen / Destroyed <input type="checkbox"/> Add Endorsement <input type="checkbox"/> Other _____							
Last Name:		First Name:			Middle Name:		
Social Security Number:		County of Residency:		Driver's License Number:		DL Issue Date:	
Date of Birth: (mm-dd-yyyy)	Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> X	Height:	Weight:	Eye Color:	Hair Color:	Race:	
City of Birth:		State of Birth:		Country of Birth other than USA:			
Mailing Address:				City:	State:	Zip Code:	
Physical Address (if different than above):				City:	State:	Zip Code:	
How long have you lived at the above address?		Home Phone Number:		Business Phone Number:			
Years	Months						
Email Address:							
FOR OFFICE USE							
ONLY: Form of <input type="checkbox"/> Money Order <input type="checkbox"/> Cashier's Check <input type="checkbox"/> Personal Check # _____ <input type="checkbox"/> Credit Card							
Payment: Applicant Name _____							
The Department of Public Safety acknowledges that on _____ the sum of \$ _____ was received by:							
_____				_____			
Signature of employee accepting application				Printed name of employee accepting application			

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.

I HEREBY STATE UNDER PENALTY OF LAW THAT:

1. I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;
2. I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;
3. I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;
4. The information in this application and any documents submitted in this application is true, correct, and complete to the best of my knowledge and belief; and
5. I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches/ criminal history searches and I authorize the investigation.

Signature of Applicant
Printed Name
Date