

Retiree Concealed Handgun Carry Authorization Application Checklist

Virginia State Police Retirees desiring authorization to carry concealed handguns may complete and forward this form along with all required materials to: **Virginia State Police, Firearms Transaction Center, Post Office Box 85608, Richmond, VA 23285-5608.**

Name: _____ Code #: _____

Date of Retirement: _____

Address: _____

Phone: _____

Enclosed:

- 2 Passport (2 x2) Photographs
- Fingerprint Impressions on State Police Card
- Completed Form SP-216A (For nationwide carry purposes only.)

(THIS SPACE FOR FIREARMS TRANSACTION CENTER USE ONLY)

Date received: _____

Approved

Not approved for the following reason: _____

Date Authorization Card Issued: _____

Date completed: _____

Other Status: