

IN THE PROBATE COURT OF NEWTON COUNTY
STATE OF GEORGIA

IN RE: _____)
) **LICENSE NO.** _____
)
Petitioner/Licensee (*Full name on current WCL*))

Petition for Replacement Georgia Weapons Carry License
Pursuant to O.C.G.A. §16-11-129(e)

Petitioner has a Georgia Weapons Carry License *issued by* _____ **County Probate Court** on _____, 20____, as numbered above. Such license has more than 90 days remaining before expiration. Since receiving my Weapons Carry License, the following has occurred:

[Initial and Complete A, B &/or C as applicable]

_____ **A) Petitioner’s License referenced above was lost/stolen/damaged.**

Petitioner requests that a replacement license be issued.

I understand that I will need to show proof of such loss by producing a copy of the applicable police report if the court requests it.

_____ **B) Petitioner’s physical address has changed.** My new address is:

Petitioner requests that a replacement license be issued showing Petitioner’s new address.

I understand that I will need to show proof of my new address by producing my current state-issued identification card or driver’s license with my new address.

_____ **B) Petitioner’s legal name has changed.** My new legal name is:

Petitioner requests that a replacement license be issued in Petitioner’s new legal name.

I understand that I will need to show proof of my new name by producing a copy of my marriage certificate, divorce decree or other order changing my name, or my current state-issued identification card or driver’s license issued in my new name.

Petitioner understands that the fee for such update is \$7.00. Petitioner acknowledges that the law requires the former license to be surrendered to and destroyed by the Court upon receipt of the replacement Weapons Carry License.

In conjunction with the issuance of a replacement Georgia Weapons Carry License, I hereby authorize the Probate Court to request and receive any criminal history record and other background information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia, in any state or local criminal justice agency in the United States or its territories, and in the Federal Bureau of Investigation.

Petitioner further declares under penalty of perjury that the within and foregoing information is true and correct.

Petitioner's Signature

Date

Petitioner's Phone Number

VERIFICATION

Georgia, Newton County

The undersigned petitioner appeared before me who on oath states the facts set forth in the foregoing petition are true.

Signature of Petitioner/Licensee

Printed name of Petitioner/Licensee

Sworn to and subscribed before me this
_____ day of _____, 20____.

Notary or Probate Clerk

**Probate Court / Servicing Agency
Name-Based NICS CHRI Consent Form**

Probate Court Name	Newton County Probate Court
Servicing Agency Name	Newton County Probate Court

Probate courts are required, under O.C.G.A. § 16-11-129 (d)(2), to complete a National Instant Criminal Background Check (NICS), prior to issuing a Weapons Carry License or renewal.

I hereby authorize the Probate Court, or their Servicing Agency, to conduct a NICS check to receive any Georgia and/or national criminal history record information as authorized by state and federal law.

Full Name (Print):			
Address:			
Sex	Race	Date of Birth	SSN (optional)

Signature

Date

The NICS name-based background check must be performed using the following information:

- o Purpose Code F (for initial and renewal applications)
- o The following ORI GA 107023J.

____ IAQ is requested, as the applicant is a non-U.S. Citizen. (Check if applicable).

For Office Use Only:

- Servicing agencies must provide **all** information that returns from the CJIS network to the Probate Court to include restricted file information.
- Probate Courts must review the record responses to ensure an NTN is provided for each inquiry.
- If the transaction returns an FBI UCN or SID in the response, an FQ must be performed on each.
- An Involuntary Hospitalization response **MUST** be included in the paperwork returned from the inquiry.

**IN THE PROBATE COURT OF NEWTON COUNTY
STATE OF GEORGIA**

IN RE:

)

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LICENSE NO. _____

)

Petitioner/Licensee (*Full name on current WCL*))

ORDER OF CANCELLATION

It appearing that the Georgia Weapons Carry License referenced above issued by this Court on _____ was lost, stolen or damaged or that the Licensee's name and/or address has changed, or some combination of the aforesaid events;

IT IS ORDERED that the said Weapons Carry License as numbered above is hereby CANCELLED and that said License be, and hereby is, REPLACED by Georgia Weapons Carry License Number _____ as provided by O.C.G.A. § 16-11-129 (e). Accordingly, a replacement of said License shall be issued to the Petitioner/Licensee upon his surrender of his or her old license if the replacement is for a name and/or address change; otherwise, the replacement license shall be issued upon the entry of this order.

SO ORDERED, this _____ day of _____, 20 _____.

Probate Judge