Pistol Permit Transfer Instructions:

To transfer your pistol records to another county, you must first complete two Firearms License Amendment Forms.

Please submit the completed Orders, $5.00 fee payable to the Ulster County Clerk’s Office and a $5.00 fee payable by check or money order to the county where the license is being transferred.
STATE OF NEW YORK

FIREARMS LICENSE AMENDMENT

AMENDMENT FORM FOR ___________________ COUNTY

DATE __________________

OR NYSP PISTOL LICENSE (CIRCLE IF APPROPRIATE)

NAME ____________ ____________

STREET ____________ ____________

TOWN ____________ ____________

COUNTY ____________ ____________

PISTOL LICENSE NUMBER ____________ ____________

DUPLICATE LICENSE NUMBER ____________ ____________

TRANSFER LICENSE NUMBER ____________ ____________

TRANSFERRED FROM ____________ ____________

TRANSFERRED TO ____________ ____________

CIRCLE APPROPRIATE TRANSACTION(S)

ACQUIRED DISPOSED MOVED NAME CHANGE TRANSFER

DUPLICATE SURRENDERED SUSPENDED REVOKED DECEASED OTHER ____________

AMEND LICENSE FOR THE FOLLOWING

1. NEW NAME ______________________________________________________________________________

2. NEW ADDRESS __________________________________________________________________________

3. FOLLOWING WEAPON(S) ACQUIRED FROM (NAME,ADDRESS)

MAKE ____________________________________________________________________________________

REVOLVER OR AUTOMATIC _____________________________________________________________________

MODEL ____________________________________________________________________________________

CALIBER __________________________________________________________________________________

SERIAL NUMBER ____________________________________________________________________________

4. FOLLOWING WEAPON(S) DISPOSED TO: (NAME,ADDRESS)

MAKE ____________________________________________________________________________________

REVOLVER OR AUTOMATIC _____________________________________________________________________

MODEL ____________________________________________________________________________________

CALIBER __________________________________________________________________________________

SERIAL NUMBER ____________________________________________________________________________

5. FOLLOWING WEAPON(S) HAS BEEN: (CIRCLE ONE) LOST STOLEN DESTROYED

LAW ENFORCEMENT AGENCY REPORTED TO:

MAKE ____________________________________________________________________________________

REVOLVER OR AUTOMATIC _____________________________________________________________________

MODEL ____________________________________________________________________________________

CALIBER __________________________________________________________________________________

SERIAL NUMBER ____________________________________________________________________________

HAVE YOU BEEN ARRESTED, INDICTED, OR CONVICTED OF ANY CRIMINAL OFFENSE, OR BEEN A PATIENT AT ANY MENTAL INSTITUTION SINCE THE ABOVE LICENSE WAS ISSUED? (CIRCLE ONE) NO YES

IF YES, GIVE DETAILS ON REVERSE

LICENSING OFFICER _________________________________________________________________________

SIGNATURE OF LICENSEE _____________________________________________________________________