

CURRENT PERMIT NO.	EXPIRATION DATE			

Mail completed application to CWPU along with the \$43 fee. Acceptable forms of payment include money order, cashier's or certified check made payable to AZ DPS. No personal checks or cash will be accepted.

Mailing address: CWPU P.O. Box 6488, Phoenix AZ 85005

Mailing address: CWPU P.C LEGAL NAME (Last)		rst)	(Middle)		COUNTY			
DECIDENCE ADDRESS (Chrost withhoused as	and individual Anademana (1 at)	CITY			STATE	ZIP CODE		
RESIDENCE ADDRESS (Street number and nar	me including Apartment / Lot)	CITT			SIAIE	ZIF CODE		
MAILING ADDRESS (if different from above)		CITY			STATE	ZIP CODE		
			I=		T			
BIRTH DATE (mm/dd/yyyy)	CONTACT PHONE NO. (In	clude Area Code)	EYE COLOR	☐ Green	HAIR COLOR	□ Grov		
ORIGIN / RACE	SOCIAL SECUR	RITY NO. (Optional)	Blue	☐ Gray	Black	☐ Gray☐ Red or Auburn		
☐ American Indian or Alaskan N	lative (I)			☐ Hazel				
Asian / Pacific Islander (A)	GENDER	HEIGHT	☐ Brown	_		☐ Sandy☐ White		
☐ Black (B)	☐ Male			T	☐ PLOMII	□ wnite		
☐ Hispanic / White (W)	☐ Female	WEIGHT	PLACE (State) OF BIRTH	(Country)				
All applicants: Please answer "YES" or "NO" to each question below. ALL questions MUST be answered.								
Are you a United Stathe following: certific personnel; or a curred Are you an alien address to the permit "A" number must be clearly visible residency in the state of Arizona. two separate businesses, organization with your name and physical address with your name and physical address Are you currently under the pardoned; or you must documentation. You	, and issue and expira Documentation may i ations or government	de of the Unite record of birth sport. tates as a lawfon, submit a cation date musiculude an Arizagencies (utilia Box), matching elony arrest? offense? If Yrights restored ibited possess	ed States or or a abroad to Am ful permanent opy (front & best be imprinted tona Driver's litty bills, credit of the address ES, the conviction of the consideration of the consi	ne of its territorie nerican citizen; resident? * ack) of your Perrit on front of card. cense or ID card card/bank statem provided on your etion must be expered for a permit.	manent Reside Submit docur I, or two docun nents, insurand r application.	ent Alien card. The mentation to prove ments issued from the policy, lease, etc.) ide, vacated or ide court		
	provide court documentation.							
	Are you an unlawful user of, or addicted to, any controlled substances?							
	Are you currently under indictment for a misdemeanor crime of domestic violence?							
	Have you ever been convicted of a misdemeanor crime of domestic violence? If YES, the conviction must be set-aside, vacated, expunged or pardoned in order to be considered for a permit. Please provide court documentation.							
	Have you been discharged from the United States Armed Forces under <u>dishonorable</u> conditions? If YES, you are disqualified from obtaining a permit.							
	Have you been adjudicated as mentally incompetent or committed to a mental institution? If YES, you are disqualified from obtaining a permit.							
Applications are processed in ac 13, Chapter 9 which are availab				3112 and Arizo	ona Administi	rative Code Title		
I attest under penalty of perjui	ry that all statements	s made on thi	s application	are true.				
X								
APPLICANT SIGNATURE					DATE	mm/dd/www		