



County of Erie  
County Clerk's Office  
Pistol Permit Department

REQUEST FOR TRANSFER OF FIREARMS LICENSE

**PLEASE PRINT ALL INFORMATION**

NAME: \_\_\_\_\_ PERMIT #: \_\_\_\_\_

SOC. SEC. #: \_\_\_\_\_ DATE PERMIT ISSUED: \_\_\_\_\_

**OLD ADDRESS:**

**NEW ADDRESS:**

Street: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Current Phone #: \_\_\_\_\_

I HEREBY REQUEST THE TRANSFER OF MY RECORDS TO: \_\_\_\_\_  
COUNTY PURSUANT TO SECTION 400.00 (SUB. 5) OF THE NY STATE PENAL  
LAW.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**COMPLETE THIS TRANSFER REQUEST AND RETURN IT TO OUR  
DEPARTMENT AT THE ADDRESS LISTED ON THE BOTTOM OF THIS  
LETTER.**

**YOU MUST ENCLOSE TWO (2) CHECKS AS INDICATED BELOW:**

- 1) ONE IN THE AMOUNT OF \$8.00 PAYABLE TO: *ERIE COUNTY  
PISTOL PERMIT DEPARTMENT.***
- 2) ONE IN THE AMOUNT OF \$5.00 PAYABLE TO: *THE COUNTY YOU ARE  
TRANSFERRING TO.***