## **Instructions for CHP Application**

Page # 1 Fill out top half completely and answer questions 1-16

Page #2 Only needs to be dated and signed in front of staff member of the Sheriff's Office

Page #3 Need to read over Disqualifying Criminal Offenses completely and Initial anywhere at the bottom of the page

Page #4 Need to fill out the top part of form with Name, Address, Birth date, Driver's License # and Social Security #(Optional). Middle Section of page is for primary doctors name( if you don't have a Dr leave section blank). Date and Sign in front of Sheriff's Office staff member.

\*Attention for Renewals Only if your address or phone number has changed please let us know\*