

GRANITE COUNTY SHERIFF'S OFFICE

115 W. KEARNEY ST
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MONTANA CONCEALED WEAPONS PERMIT – CWP
REQUEST TO RENEW

I, _____, am requesting to renew my Montana
Concealed Weapons Permit.

my current permit expires on _____ my current permit # is _____

Please attach **\$25.00 renewal fee receipt from the **Granite Co. Treasurer's Office** to this form.

If there has been any changes to your address or phone number, please list those changes below:

By signing this form, I affirm that nothing has changed that would affect the renewal of my CWP.

X _____

Date: _____