



**DEPARTMENT OF GAME AND INLAND FISHERIES
LIFETIME LICENSE SALES
P.O. Box 2978
HENRICO, VA 23228-9700
866-721-6911**

(Hearing impaired call TDD# 804-367-1278)

**Commonwealth of Virginia
Application for a previously issued Lifetime License
Upgrade, Change of Address, or Replacement**

Instructions: *(Please allow up to 45 days for processing.)*

1. Complete all information provided on this application to ensure completion of your request.
2. You do have the option to call us at the number listed above to order a replacement of your lifetime license instead of mailing this application.
3. Include a **PERSONAL CHECK, MONEY ORDER or CASHIER'S CHECK** made payable to the **TREASURER OF VIRGINIA**.
4. Return this application and any required fee to: **Department of Game and Inland Fisheries
Attention: Lifetime License Sales, Upgrade Replacement
P.O. Box 2978
Henrico, VA 23228-9700**

All fields with an asterisk * are required below:

DGIF Customer ID#: _____ **and/or, Lifetime CID#:** _____

***Applicant's Name:** _____ **Gender:** Male Female
(Please Print) First Middle Initial Last Name

***State Issued Driver's or Identification number last 4 digits:** _____ ***Social Security No. last 4 digits:** _____

***Telephone:** _____ - _____ - _____ (Cell, Home, Work, Other) ***Date of Birth:** ____/____/____

***Address:** _____

***City:** _____ **State:** _____ **Zip:** _____ - _____

E-mail Address: _____

If this is an address change please provide previous address: _____

If this is a name change you must include the court or other legal documentation of the name change.

The new lifetime license card is a hard durable plastic card with design; or you do have the option of printing and using a paper license from your DGIF account at no cost, please visit www.gooutdoorsvirginia.com

<input type="checkbox"/>	\$ 10.00	Hard Durable Plastic Card showing your lifetime license(s)
<input type="checkbox"/>	\$ ____.	Contribution to " Hunters for the Hungry ": <input type="checkbox"/> \$ 2.00 <input type="checkbox"/> \$ 5.00 <input type="checkbox"/> \$ 10.00 <input type="checkbox"/> \$ 20.00 <input type="checkbox"/> \$ 50.00
\$ ____.		Total Amount Due

Applicant's Certification

By signing this application, I certify that the above information is true and correct. **NOTE:** Any person who knowingly makes a false statement in order to secure a license shall be guilty of a Class 2 misdemeanor, punishable by up to six months in jail, a fine of up to \$1,000 or both.

Signature: _____ **Date:** _____