



Concealed Carry NOLA Presents

How to apply for a Louisiana Concealed
Handgun Permit online

www.concealedcarrynola.com

504-430-7409

Before You Start The Application

- Welcome to Concealed Carry NOLA's tutorial on how to apply for a concealed handgun permit online via the LSP web portal.
- You must complete a training course approved by the Louisiana State Police Concealed Handgun Unit and get a certificate of training prior to applying for the permit.
- You must also have a valid Louisiana drivers license or ID
- There may also be additional documents required depending on your particular circumstances. Please consult your instructor or the LSP website for more information on what documents may be required for your application.

Website Links

- Link to online app: <https://chp-web.dps.louisiana.gov/>
- Link to LSP website: <http://www.lsp.org/handguns.html>
- Link to course schedule Concealed Carry NOLA <http://concealedcarrynola.com/Schedule.html>
- Link to PDF of printable application with instructions: <http://concealedcarrynola.com/images/chApplication.pdf>

LACHP

Louisiana Concealed Handgun Permit



Contact Information

General Information Line
LSP HQ Main Number: (225) 925-6006

[Click here for GENERAL
INFORMATON AND
INSTRUCTIONS and MAIL-IN
APPLICATION](#)



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[Online Conduct Policy](#)

I ACCEPT the above statement

Best if viewed using IE 7.0 or higher with min screen resolution of 1024 x 768 or higher

Getting Started

- [Start Application](#)
- [Search Application](#)
- [Change of Address Request](#)
- [FFL CHP Status Inquiry](#)

Starting a Application

Click on the following link to go to the above pictured URL to start the application: <https://chp-web.dps.louisiana.gov/>

LACHP

Louisiana Concealed Handgun Permit



[Home](#)

[Help](#)



Contact Information

General Information Line
LSP HQ Main Number: (225) 925-6006

[Click here for GENERAL INFORMATION AND INSTRUCTIONS and MAIL-IN APPLICATION](#)



Terms of Use Policy

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Online Conduct Policy

I ACCEPT the above statement

Best if viewed using IE 7.0 or higher with min screen resolution of 1024 x 768 or higher

Getting Started

- Start Application
- Search Application
- Change of Address Request
- FFL CHP Status Inquiry

You must check the box at the bottom accepting the terms of use policy before you can click "Start Application." Then click "Start Application" on the right to start the application.



[Welcome to Louisiana State Concealed Handgun Permit Registration](#)

- Please enter a valid email address. This email address will be used to send important information about this application.
- Image code at the bottom is not case sensitive.
- The system will auto generate the Instructor's name by entering the valid Instructor's number.
- Enter only numbers in LSP Instructor # field.

Applicant Registration Information

Application Type	<input type="text" value="Select Application Type..."/>						
Last Name	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>	Suffix	<input type="text"/>
Email address	<input type="text"/>	Retype Email address	<input type="text"/>				
Daytime/Business Phone	<input type="text" value="() - -"/>	Driver's License	<input type="text"/>	D/L State	<input type="text" value="Select State"/>	Fax	<input type="text" value="() - -"/>
		Home/Contact Phone	<input type="text" value="() - -"/>				

[Generate New Image](#) Type the code from the image

Register

Cancel

Once you click “Start Application” you will come to the “Applicant Registration Information” page.



[Welcome to Louisiana State Concealed Handgun Permit Registration](#)

- Please enter a valid email address. This email address will be used to send important information about this application.
- Image code at the bottom is not case sensitive.
- The system will auto generate the Instructor's name by entering the valid Instructor's number.
- Enter only numbers in LSP Instructor # field.

Applicant Registration Information			
Application Type	<input type="text"/>	Middle Name	<input type="text"/>
Last Name	<input type="text"/>	Suffix	<input type="text"/>
Email address	<input type="text"/>	D/L State	<input type="text"/>
Daytime/Business Phone	<input type="text"/>	Home/Contact Phone	<input type="text"/>
	<input type="text"/>	Fax	<input type="text"/>



[Generate New Image](#)

Type the code from the image

You will then select “Concealed Handgun Permit” from the drop down menu next to “Application Type”, and fill in the rest of the information requested. You will need your instructor’s LSP number to start the application. My instructor number is “530.” Once you enter this number it will pull up my instructor information and that will tell the LSP which instructor taught your certification course. You will then click “Register” button at the bottom.

From: Do_not_reply_CHP@dps.la.gov
Subject: Concealed Handgun Permit Registration - (Concealed Handgun Permit)
Date:
To:

Application Registration for Concealed Handgun Permit was complete.

You will need the 'Reference ID' and 'PIN' to start/access your application.

Reference ID:
PIN:

Click on the link below or cut and paste it in the web browser address bar.

<https://chp-web.dps.louisiana.gov/FrontUser/SearchApp.aspx?r=jfapmswu0nl&p=APMSW&t=1>

Autogenerated by LDPS CHP Server.

P.O. Box 66375, Baton Rouge, LA 70896-6375 Customer Service: (225) 925-4867 / Fax: (225) 922-0225

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Once you start the application you will receive an email with a Reference ID, PIN, and a link that you will click on to start entering data into your application. Be sure to save the email. You will need the Reference ID and PIN to access you application. You will also need to provide the last four digits of your social security number to access your application. Now click on the link in the email to start entering data into your application.

General Information Page:

Now you will start entering the data required on the first tab of the online application. You will need to supply them with address going back 15 years if you have not been a resident of Louisiana for the past consecutive 15 years. If you have a out of state address you will use “out of state” in the “Parish/County” drop down menu

Click here for GENERAL INFORMATION AND INSTRUCTIONS

Print Save Validate Review And Submit

First Name Last Name Social Security Number: Record Status: INCOMPLETE

The data on this page can be saved by clicking on 'SAVE' button or clicking on an application tab.
Select 'Out Of State' for Parish/County, if you are outside of Louisiana State.
The system will auto generate the Instructor's name by entering the valid instructor's number.

Applicant Questionnaire Additional Info Attachments Affidavits

Applicant Information

Application Type: New Renewal Lifetime

Last Name First Name Middle Name Suffix Maiden Name

List Any Aliases or Legal Name Changes [Add Aliases](#)

Last Name	First Name	Middle Name
-----------	------------	-------------

Race: WHITE Sex: M Height: ft. in. Weight: lbs Home Phone Number: Daytime/Business Phone: Eye Color: BLUE Hair Color: GREY

Date of Birth: mm/dd/yyyy Social Security Number: Parish Of Residence: Issue Date of D/L: mm/dd/yyyy Expiration Date of D/L: mm/dd/yyyy

Driver's License Number: LA Identification Card Number: LSP Instructor #: b50 D/L Issue State: LOUISIANA Issue Date of ID: mm/dd/yyyy Instructor First Name: David Instructor Last Name: Newman

Current Physical Address: Street Address, City, State, Zip Code, Parish/County

Mailing Address: Street Address, City, State, Zip Code, Parish/County

Check here if you have resided at current residence for more than fifteen (15) years.

Previous Residences

Complete this section if you have not lived at your current address for the fifteen (15) years preceding the date of this application.

Address	From	To
Street Address, City, State, Zip Code, Parish/County	mm/dd/yyyy	mm/dd/yyyy
Street Address: 223 LOUIS MUEHL LN, City, State, Zip Code, Parish/County	mm/dd/yyyy	mm/dd/yyyy

Save Your Data:

Note at the top right of the page there is a “Save” button. You should save your data as you enter it. You may also want to use the “Validate” button to make sure that you have entered all the information required before you move to the next page of the online application. If you have to stop in the middle of your application saving your data will allow you to start where you left off when you pull up the application again.

Click here for GENERAL INFORMATION AND INSTRUCTIONS

Print Save Validate Review And Submit

First Name Last Name Social Security Number: Record Status: INCOMPLETE

The data on this page can be saved by clicking on 'SAVE' button or clicking on an application tab.
Select 'Out Of State' for Parish/County, if you are outside of Louisiana State.
The system will auto generate the Instructor's name by entering the valid instructor's number.

Applicant Questionnaire Additional Info Attachments Affidavits

Applicant Information

Application Type: New Renewal Lifetime

Last Name First Name Middle Name Suffix Maiden Name

List Any Aliases or Legal Name Changes Add Aliases

Race: WHITE Sex: M Home Phone Number Daytime/Business Phone

Height: ft. in. Weight: lbs Eye Color: BLUE Hair Color: GREY

Date of Birth: mm/dd/yyyy Social Security Number Parish Of Residence

Driver's License Number D/L Issue State: LOUISIANA Issue Date of D/L: mm/dd/yyyy Expiration Date of D/L: mm/dd/yyyy

LA Identification Card Number Issue Date of ID: mm/dd/yyyy Expiration Date of ID: mm/dd/yyyy Place Of Birth

LSP Instructor#: 550 Instructor First Name: David Instructor Last Name: Newman

Current Physical Address: Street Address City State Zip Code Parish/County

Mailing Address: Street Address City State Zip Code Parish/County

Check here if you have resided at current residence for more than fifteen (15) years.

Previous Residences Add Address

Complete this section if you have not lived at your current address for the fifteen (15) years preceding the date of this application.

Address				From	To
Street Address	City	State	Zip Code	Parish/County	mm/dd/yyyy mm/dd/yyyy
Street Address	City	State	Zip Code	Parish/County	mm/dd/yyyy mm/dd/yyyy

Place of Employment				
Employer Name		<input type="text"/>		
Street Address		<input type="text"/>		
Business Address	City	State	Zip Code	Parish/County
<input type="text"/>	<input type="text"/>	<input type="text" value="Select a State"/>	<input type="text" value="____-____"/>	<input type="text" value="Select a Parish"/>
Name of Supervisor		Contact Number		
<input type="text"/>		<input type="text" value="(____)-____-____"/>		

Marital Status				
Marital Status (Check all that Apply)	<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED



General Information Page Continued:

At the bottom of the page you will find “Place of Employment” and “Marital Status.” If you are currently married but were divorced prior to your current marriage you will need to check both boxes “Married” and “Divorced.” This will prompt you later to upload a copy of your divorce decree’s on the “Attachments Page.” When you’re done with entering data into this page you should click the “validate” button at the top right to make sure everything is entered correctly.

Then click the “save” button at the top to save your data.

Then click “Next” at the bottom of the screen.

Questionnaire Page:

You must answer “yes” or “no” to all of the questions on this page. Note in question 7 if you have ever been arrested you must answer “yes”. Even if the charges were dropped, set aside, dismissed, or expunged. If you answer “no” and the LSP finds an arrest your application will be denied. That would be considered lying on the application and once you are denied a permit it is very difficult to get one. When you’re done with entering data into this page you should click the “validate” button at the top right to make sure everything is entered correctly. Then click the “save” button at the top to save your data. Then click “Next” at the bottom of the screen.

The screenshot shows the LACHP (Louisiana Concealed Handgun Permit) application interface. At the top, there is a header with the LACHP logo and a photograph of police officers. Below the header, the page title is "Concealed Handgun Permit Application". There are navigation links for "Home" and "Help". A status bar shows "Record Status: INCOMPLETE". A list of instructions includes: "The date on this page can be saved by clicking on 'SAVE' button or clicking on an application tab.", "Select 'Out Of State' for Parish/County, if you are outside of Louisiana State.", and "The system will auto generate the Instructor's name by entering the valid instructor's number." Below the instructions are tabs for "Applicant", "Questionnaire", "Additional Info", "Attachments", and "Affidavits". The main content area contains a list of 20 questions with radio button options for "Yes" and "No". At the bottom, there are "Previous" and "Next" navigation buttons.

LACHP
Louisiana Concealed Handgun Permit

Home Help

Concealed Handgun Permit Application

[Click here for GENERAL INFORMATION AND INSTRUCTIONS](#)

First Name: Last Name: Social Security Number: Record Status: **INCOMPLETE**

- The date on this page can be saved by clicking on 'SAVE' button or clicking on an application tab.
- Select 'Out Of State' for Parish/County, if you are outside of Louisiana State.
- The system will auto generate the Instructor's name by entering the valid instructor's number.

Applicant Questionnaire Additional Info Attachments Affidavits

ALL APPLICANTS PLEASE ANSWER 'YES' OR 'NO' TO ALL QUESTIONS BELOW. Read each question carefully. If you answered 'Yes' to questions 7-12, attach certified true copies of the court documents, or 'Yes' to questions 13-19, have the treating physician complete the medical summary disposition form.

- Yes No 1. Are you a United States Citizen?
- Yes No 2. Are you lawfully present in the United States?
- Yes No 3. Are you a legal resident of the State of Louisiana?
- Yes No 4. Have you continuously resided in the State of Louisiana for the past fifteen (15) years?
- Yes No 5. Are you at least 21 years of age?
- Yes No 6. Have you completed training as prescribed in LRS 40:1379.3 (D) (1) and LAC 55:1307.D? (Attach Training Completion Certificate)
- Yes No 7. Have you ever been arrested for any criminal offense? Criminal Offense, Arrests, Detentions and Litigation - Criminal Offense: an act punishable by law. If you have ever been arrested, charged, detained, indicted, or summoned for any criminal offense or violation, **EVEN THOSE CHARGES WHICH YOU BELIEVE TO HAVE BEEN DROPPED, DISMISSED, NOLLE PROS, EXPUNGED, etc., you must answer "YES" to the arrest questions and submit certified true copies of the final court disposition of the case with your application. You must list all violations of law or municipal ordinances, except those such as traffic violations (speeding, red light, expired license, etc.). Failure to answer this question correctly will result in the denial of your application.**
- Yes No 8. Have you ever been found guilty of, or entered a plea of guilty or nolo contendere to Operating a Vehicle While Intoxicated?
- Yes No 9. Have you ever received a pardon or expungement for a criminal offense?
- Yes No 10. Are you currently on probation or parole for a criminal offense?
- Yes No 11. Are you a fugitive from justice?
- Yes No 12. Are you currently subject to any preliminary or permanent injunction, or restraining or protective order, including but not limited to divorces, family, or domestic violence?
- Yes No 13. Are you an unlawful user of or addicted to Marijuana, depressants, stimulants, or narcotic drugs?
- Yes No 14. Have you ever been committed involuntarily, or voluntarily admitted to any treatment facility, institution, or hospital for the abuse of a controlled dangerous substance as defined in R.S. 40:961 and 464 or for the abuse of alcoholic beverages?
- Yes No 15. Have you ever been adjudicated mentally deficient or been committed to a mental institution?
- Yes No 16. Have you been hospitalized for any form of mental illness or infirmity?
- Yes No 17. Have you ever received medical treatment for a mental disorder or any kind by a licensed medical practitioner?
- Yes No 18. Are you currently taking, or have you ever been prescribed any medication used for the treatment of depression, psychosis or any mental illness?
- Yes No 19. Are you suffering from any mental or physical infirmity due to disease, illness or retardation, which could prevent the safe handling of a handgun?
- Yes No 20. Have you ever been denied a concealed handgun permit in any jurisdiction or had such permit suspended or revoked?

Additional Info Page:

You may need a medical form signed by your doctor if you answered “yes” to questions 13-19. (see link below) You will also need a copy of your DD214 if you have served in the military. You will not be charged a permit fee if you have served in the military and supply the LSP with a copy of your DD214. When you’re done with entering data into this page you should click the “validate” button at the top right to make sure everything is entered correctly. Then click the “save” button at the top to save your data. Then click “Next” at the bottom of the screen.

LACHP
Louisiana Concealed Handgun Permit

Home Help

Concealed Handgun Permit Application

[Click here for GENERAL INFORMATION AND INSTRUCTIONS](#)

First Name: Last Name: Social Security Number: Record Status: **INCOMPLETE**

- The date on this page can be saved by clicking on 'SAVE' button or clicking on an application tab.
- Select 'Out Of State' for Parish/County, if you are outside of Louisiana State.
- The system will auto generate the Instructor's name by entering the valid Instructor's number.

Applicant Questionnaire **Additional Info** Attachments Affidavits

Arrest, Detentions, and Litigation

If you answered "YES" to questions 7-12, please enter all applicable arrests and attach certified copies of documentation to prove disposition. Click "Add Information" button for each arrest.

Medical Information - Treating Physician
(ONLY NECESSARY IF YOU ANSWERED "YES" TO QUESTIONS 13-18.)

Name: Address: Phone Number:

Notes:

MILITARY SERVICE

Yes No 1. Have you ever served in the Armed Forces of the United States?

Yes No 2. Are you currently serving in the Armed Forces of the United States?
Note: You must provide proof of current military orders.

Yes No 3. Have you been discharged from the Armed Forces of the United States? Note: You must provide Proof of Discharge with Dept. of Defense Form-214 (DD-214)

If Discharged indicate the type of discharge.
Note: You must Provide Proof of Discharge. For example Department of Defense Form-214 (DD-214).

Link to medical form: <http://concealedcarrynola.com/images/chMedicalDispo.pdf>

Attachments Page:

On this page you will upload a copy of your drivers license or ID, and the certificate of training. Depending on your particular circumstances you may have additional documents to upload. Each document should be in a separate file and in PDF format preferred. The system will be asking for each category of document separately. You can combine all “dispositions of arrest” and “divorce decrees” into one PDF file. When you’re done with entering data into this page you should click the “validate” button at the top right to make sure everything is entered correctly. Then click the “save” button at the top to save your data. Then click “Next” at the bottom of the screen.

The screenshot shows the 'Attachments' page of the LACHP (Louisiana Concealed Handgun Permit) application system. At the top, there is a header with the LACHP logo and a navigation bar with 'Home' and 'Help' links. Below the header, the page title is 'Concealed Handgun Permit Application'. A link for 'GENERAL INFORMATION AND INSTRUCTIONS' is provided, along with 'Print', 'Validate', and 'Review And Submit' buttons. A progress bar shows the current step is 'Attachments', with other steps like 'Applicant', 'Questionnaire', 'Additional Info', and 'Affidavits' also visible. A checkbox for mailing attachments and a 'Print Cover Letter' button are present. A list of required documents is shown: LA Driver Permit or ID Card, Proof of Training, and Marital Status Documents. A 'Type of Document' dropdown is set to 'Certified True Copy of Court Minutes'. An 'Upload Files' section includes a 'Select' button. An 'Add Comments' field with 'Clear' and 'Upload' buttons is also visible. A table lists the uploaded attachments:

Attachments	Type	Uploaded By	Date Created	Comments
LICENSE.JPG	LA Driver Permit or ID Card		3/7/2018	
CONCEALED CARRY CERTIFICATE.JPG	Proof of Training		3/7/2018	
JUDGEMENT OF DIVORCE 1888.JPG	Marital Status Documents		3/7/2018	

At the bottom of the page, there are 'Prev' and 'Next' navigation buttons.

Review and Submit Page:

Now that you have entered your data and uploaded all necessary documents (except for fingerprints) you are ready to review your information before your submit your application. Click the button at the top right that says “Review and Submit.” Be sure to check the information on each page of the online application for errors and correct them accordingly. On each page you will click “Continue Review and Submit” after you are sure all of your data is correct. If you have to make changes be sure to save your changes by clicking the “save” button on any page.

LACHP
Louisiana Concealed Handgun Permit

Home Help

Concealed Handgun Permit Application

Click here for **GENERAL INFORMATION AND INSTRUCTIONS**

First Name: Last Name: Social Security Number: Record Status: **INCOMPLETE**

- Click on 'Review And Submit' button above.
- Continue through the process.
- 'Submit Application' button below will become active on completing the 'Review And Submit' process.
- The system will auto generate the Instructor's name by entering the valid Instructor's number.

Applicant Questionnaire Additional Info Attachments Affidavit

!!! PLEASE PRINT THE APPLICATION BEFORE SUBMITTING !!!

I certify and acknowledge that I have read and agree to all applicable affidavit pages, and the information is true to the best of my knowledge.
Enter PIN (received in email during registration) to electronically sign the application and submit to LA CHP

of 2

Louisiana Department of Public Safety and Corrections
Office of State Police
Louisiana Concealed Handgun Permit Application

The application will not be processed unless completed in its entirety and all supporting materials uploaded. [View application form](#)

Application Type:	Current ID# (Renewal Only)	Fee Office (Fee Only)
<input checked="" type="radio"/> NEW PERMIT		
<input type="radio"/> RENEWAL PERMIT		
<input type="radio"/> DUPLICATE PERMIT		
LEGAL NAME (LAST, FIRST, MIDDLE)		MAIDEN NAME
LIST ANY ALIASES OR LEGAL NAME CHANGES		PARISH OF RESIDENCE
RACE White		HOME PHONE NUMBER
SEX	HEIGHT ft. in.	WEIGHT lbs.
EYE COLOR	HAIR COLOR	DATE OF BIRTH
SOCIAL SECURITY No. (SSN)		DAYTIME BUSINESS PHONE NUMBER
DRIVER LICENSE NUMBER		STATE
LA IDENTIFICATION CARD NUMBER		
PLACE OF BIRTH (City, State, Country)	ISSUE DATE OF DL OR ID CARD	EXPIRATION DATE OF DL OR ID CARD
CURRENT PHYSICAL ADDRESS (Street Address)	CITY	STATE
		POSTAL ZIP CODE
CURRENT MAILING ADDRESS (Street Address)	CITY	STATE
		POSTAL ZIP CODE
How long have you lived at your current address? From to present.		
Previous addresses... Complete this section if you have not lived in your current address for the three (3) years preceding the date of this application. (U.S.)		
ADDRESS	CITY	STATE
		DATES
		FROM TO

Print Before You Click Final Submit:

Notice at the top of this page in blue it is prompting you to print your application before you click submit. It is very important that you print the sheet with the bar code at the bottom before you submit the application so that you can submit your fingerprints along with the bar code sheet.

This will tell the LSP what application to put your fingerprints with. You will not be able to pull up the application again once it is submitted. You may also want to save a copy in PDF format for your records. Once you have printed the sheet with the bar code at the bottom you can now enter the "PIN" number you received when you started the application and click the final "Submit" button.

!!! PLEASE PRINT THE APPLICATION BEFORE SUBMITTING !!!

I certify and acknowledge that I have read and agree to all applicable affidavit pages, and the information is true to the best of my knowledge.

Enter PIN (received in email during registration) to electronically sign the application and submit to LA CHP

Louisiana Department of Public Safety and Corrections
Office of State Police

Louisiana Concealed Handgun Permit Application A

This application will not be processed unless completed in its entirety and submitted along with all supporting documents and application fees.

Application Type		Current GPU (Renewal Only)		For Office Use Only	
<input checked="" type="checkbox"/> NEW PERMIT					
<input type="checkbox"/> RENEWAL PERMIT					
<input type="checkbox"/> LIFETIME PERMIT					

LEGAL NAME (LAST, FIRST, MIDDLE) LAMBERT, PATRICK RYAN			MAIDEN NAME		
LIST ANY ALIASES OR LEGAL NAME CHANGES			PARISH OF RESIDENCE PLAQUEMINES		

RACE White				HOME PHONE NUMBER (985) 745-9553	
SEX M	HEIGHT 6 ft. 1 in	WEIGHT 255 lbs	EYE COLOR BLUE	HAIR COLOR GRAY	DATE OF BIRTH 12/30/1957
DAYTIME/BUSINESS PHONE NUMBER (504) 559-5111					

SOCIAL SECURITY No. (SSN) 43511787		DRIVERS LICENSE NUMBER 004235175		STATE LA		LA IDENTIFICATION CARD NUMBER	
PLACE OF BIRTH (City, State, Country) NEW ORLEANS LA		ISSUE DATE OF DL OR ID CARD DL - 01/20/2016		EXPIRATION DATE OF DL OR ID CARD DL - 12/30/2021			

CURRENT PHYSICAL ADDRESS (Street Address) 223 LOUIS MOREL LN		CITY BURAS		STATE LA		POSTAL ZIP CODE 70041	
CURRENT MAILING ADDRESS (Street Address) 2 ZEE ANN DR		CITY LULING		STATE LA		POSTAL ZIP CODE 70070	

How long have you lived at your current address? From: _____ to present: _____

Previous residences - Complete this section if you have not lived at your current address for the fifteen (15) years preceding the date of this application. (15-)

ADDRESS	CITY	STATE	DATES	
			FROM	TO
115 ASPHODEL DR.	LULING	LA	3/21/1991	2/1/2016
223 LOUIS MOREL LN	BURAS	LA	2/1/2016	3/7/2018

PLACE OF EMPLOYMENT					
NAME OF COMPANY/BUSINESS CAJUN FISHING ADVENTURES					
ADDRESS 35427 HWY 23					
CITY BURAS		STATE LA		POSTAL CODE 70041	

MARITAL STATUS (Check all that Apply)					
<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input checked="" type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	IF DIVORCED, PLEASE PROVIDE DOCUMENTATION	

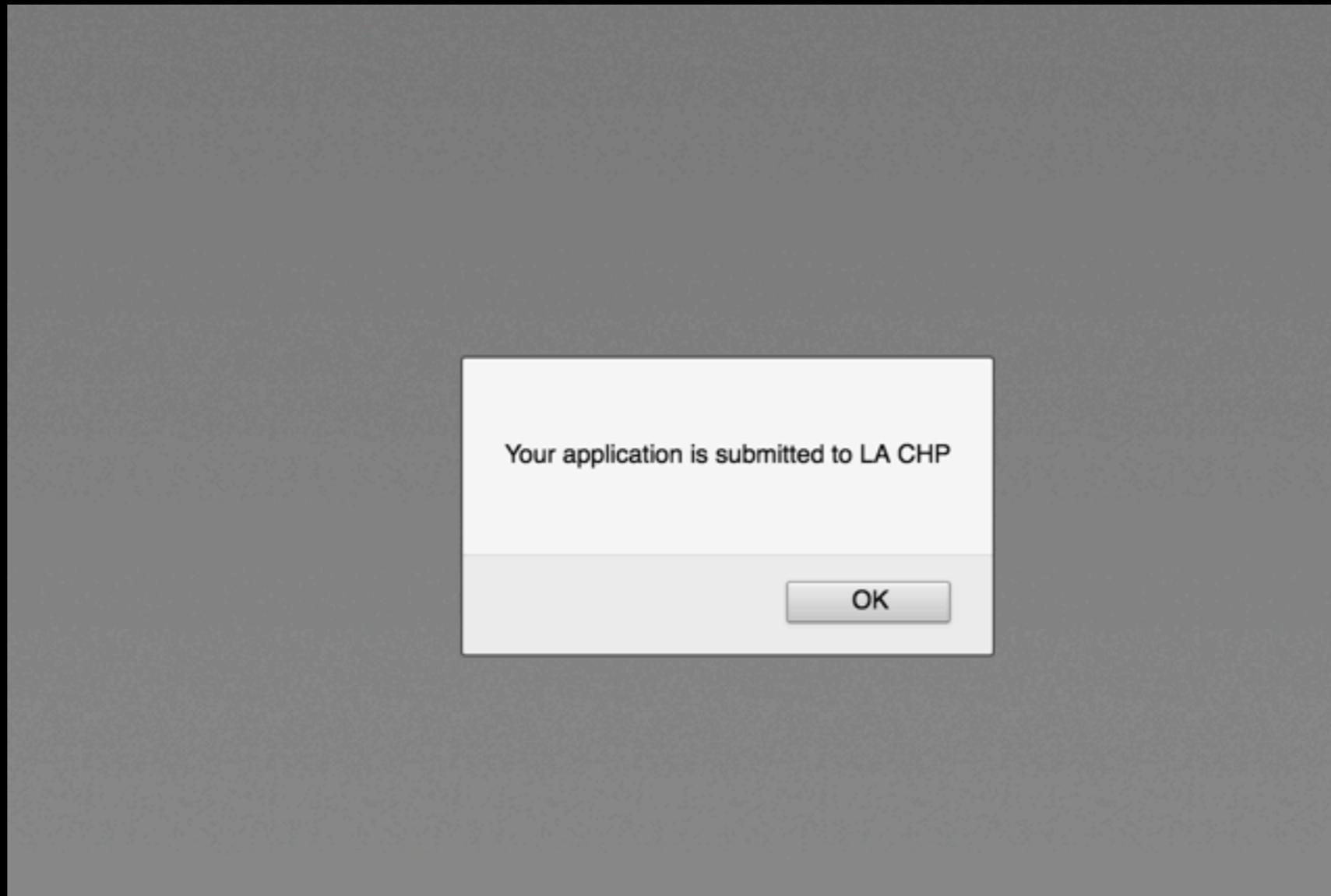
OFFICE USE ONLY			
DATE ENTERED	CHECK NUMBER	RECEIPT NUMBER	INITIALS

DPSSP 4645 (Rev. 07/10)



000302945-1





Once you click “Submit” your screen should say “Your application is submitted to LA CHP”. You must submit your fingerprints within 2 weeks of submitting your application online. If you are going to Baton Rouge to get your fingerprints done you will need to remember to bring the sheet with the bar code with you when you go to the LSP CHP office.

LSP CHP Office Info:

- Louisiana State Police Concealed Handgun Unit, 7919 Independence Blvd, Baton Rouge, LA. 70806
- Office hours 8:30AM-4:30PM Monday - Thursday, and 8:30AM-1:00PM on Friday
- They do accept credit cards for fingerprints and they only charge \$10
- Once you get your fingerprints done you will receive an email stating that they have accepted or approved your application, click on this link to pay.
- Once you pay for the permit via the link in the email your permit will show up in the mail usually within 10-21 working days.



Concealed Carry NOLA
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