

COUNCIL ON LAW ENFORCEMENT EDUCATION AND TRAINING

**2401 Egypt Road
Ada, Ok 74820
Phone: 405.239.5110**

PRIVATE SECURITY NOTICE OF CHANGE OF ADDRESS

**Mail this form to the address above. Original Signature required.
FAXES AND EMAILS WILL NOT BE ACCEPTED.**

*** Required Fields Request - NOTE: INCOMPLETE REQUEST WILL NOT BE PROCESSED**

LICENSEE INFORMATION

*License No.:		*Last 4 SSN:	
*Name (as it appears on license):			

CHANGES/CORRECTIONS REQUESTED

*New Mailing Address: _____

*City, State, Zip: _____

*New Physical Address: _____

*City, State, Zip: _____

*County: _____

*New Telephone #: _____

*Email Address: _____

*Does this include an address change for your agency? YES NO

If so, what is agency name? _____

*Signature:		*Date:	
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For CLEET use only

Is individual peace officer or reserve officer? YES NO If yes, copy to appropriate dept.

Processed by:		Date:	
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