



Illinois Retired Officer Concealed Carry (IROCC)

FORM A

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RETIRED OFFICER CONCEALED CARRY
RENEWAL APPLICATION

Type or Print Clearly

Name _____
Last Name First Name Middle Initial

S. S. # _____ FOID # _____ Date of Birth _____

Legal Residence: _____ Phone: _____
Street and/or P.O. Box Area Code/Number

_____ City State Zip Code

County: _____ Retiring Agency: _____

For notification via E-mail, please provide active E-mail address: _____

To ensure proper notification, please report any changes in address or e-mail address immediately.

PREREQUISITE DOCUMENTS FOR RENEWAL APPLICANTS

The following documents must be submitted to the Illinois Retired Officer Concealed Carry office along with this completed and signed application. **Applications that are incomplete or do not contain all of the required documents will be returned unapproved.**

1. **Completed and signed renewal application (Form A)**
2. **Affidavit completed and signed by applicant. (Form B)**
3. **Copy of valid Illinois FOID card (copy of front and back). Please do not omit this.**
4. **Non-refundable application fee of \$75.00 for one handgun or \$100.00 for both revolver & semi-automatic in the form of a check or money order, *made payable to Illinois Retired Officer Concealed Carry or IROCC.* Do not send cash. Application fee is non-refundable should the applicant fail to meet weapons certification.**

I attest that the information and documentation on or attached to this application is accurate.

Applicant's Signature Date