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## Cohoes Police Department

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### **COHOES POLICE DEPARTMENT PISTOL PERMIT INFORMATION**

The purpose of providing this information is in case the applicant needs to be contacted for questions. All information is confidential.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: Primary \_\_\_\_\_ Work \_\_\_\_\_

Applicants Signature \_\_\_\_\_ Date: \_\_\_\_\_