Texas Department of Public Safety
Regulatory Services Division

HANDGUN LICENSING

To upload your supporting documents please visit RSD secured website: http://www.dps.texas.gov/rsd/contact/ltcatt.aspx

ADDRESS AND BUSINESS HISTORY FORM

APPLICANT NAME

RESIDENCE HISTORY INFORMATION (*LIST ALL ADDRESSES LEADING UP TO THE RESIDENCE LISTED ON LTC-78)

You are required to provide all addresses for a full five years (60 months) preceding the date of this application (e.g. 04/2005 to 04/2010), with no gaps and explaining any overlaps by attaching a written statement.

DATE RANGE(S) (MM/YYYY)	ADDRESS(ES) (MUST BE COMPLETE ADDRESS INFORMATION FOR EACH ITEM)		
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Address		
TO (ENDED)	City	State (2-Letter Code)	Zip

EMPLOYMENT HISTORY INFORMATION (*LIST ALL ADDRESSES LEADING UP TO THE EMPLOYMENT LISTED ON LTC-78)

FROM (BEGAN)	Employer Name / Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Employer Name / Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Employer Name / Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Employer Name / Address		
TO (ENDED)	City	State (2-Letter Code)	Zip
FROM (BEGAN)	Employer Name / Address		
TO (ENDED)	City	State (2-Letter Code)	Zip

LTC-78B (Rev. 7/17)