



## CCAP Change of Contact Information

Use this form to change or add contact information, including adding a new contact. Whenever possible, the change should be requested 60 days or more before the change.

**NOTE: If any new contact is a key employee, Live Scans must also be obtained.**

**Provide all required information at one time, including copies of live scan forms.**

CCAP Number(s) \_\_\_\_\_

Live Scan  
Obtained  
and Included

New Contact \_\_\_\_\_

Position \_\_\_\_\_

New Contact \_\_\_\_\_

Position \_\_\_\_\_

New Contact \_\_\_\_\_

Position \_\_\_\_\_

Date of Change \_\_\_\_\_

Change of Contact Information fee payable to the City of Arcata

Date Submitted \_\_\_\_\_

Accepted by \_\_\_\_\_

Approval Date \_\_\_\_\_

Action Taken \_\_\_\_\_