CHIEF OF POLICE
ROBERT J. GAGNE

ASSISTANT CHIEF
EDWARD A. KOETHER

ORANGE DEPARTMENT OF POLICE SERVICE

You are required to furnish ORIGINALS of ALL the following in order to process your temporary state pistol permit application:

- ☐ **Proof of Orange residency** (utility bill, tax statement, etc.)
- ☐ **State of Connecticut picture identification** (driver's license or CT State ID Card)
- ☐ **Proof of citizenship/Alien registration:** Applicants must provide proof of citizenship, such as a birth certificate, voter registration card or US Passport. Legal alien residents must provide alien registration numbers and 90 day proof of residency. Naturalized citizens require proof of citizenship.
- ☐ An **application completed and NOTARIZED**. Notary name, stamp and raised seal must be visible. Answer all applicable questions, and write N/A if a question does not apply to you. **The police department DOES NOT provide notary service.**
- ☐ **Letter or certificate** attesting to your completion of a course in the Safety and Use of Pistols and Revolvers, signed by a pistol or revolver instructor certified by the NRA, DEP or State of CT.
- ☐ **Cashier's Check or Money Order** for **$50.00** made out to: ***Treasurer-State of CT*** (for a state criminal history records check) **NO PERSONAL CHECKS**
- ☐ **Cashier's Check or Money Order** for **$19.25** made out to: ***Treasurer-State of CT*** (for an FBI criminal history records check) **NO PERSONAL CHECKS**
- ☐ **Cashier's Check or Money Order** for **$70.00** made out to: ***TOWN OF ORANGE*** (for local background check and application processing) **NO PERSONAL CHECKS**

☐ Make an **APPOINTMENT** to submit your application and get fingerprinted. **Do not attempt to drop off your application prior to being fingerprinted; it will not be accepted.** You can request an appointment by calling (203) 891-2134. Appointments are available on Thursdays; the times are determined by staffing levels.

Be sure to bring **ALL** the properly completed required documentation to your appointment. The OPD will make copies as required. ***Failure to provide all the proper items on the above checklist will result in the cancellation of your appointment, and a new appointment will have to be scheduled.***

After your temporary state permit has been approved by the Town of Orange, it will be valid for 60 days and cannot be renewed. You must apply within these 60 days for a permanent state permit at the Department of Emergency Services and Public Protection (State Police). Final instructions will be given at that time.

Revised 8/2011

Connecticut Department of Public Safety ("DPS")
Division of State Police
Special Licensing and Firearms Unit

PISTOL PERMIT APPLICATION

• *Before completing this application, it is suggested that you review the Connecticut General Statutes pertaining to firearms. These can be accessed on the Internet at www.cga.ct.gov. For those without Internet access, please contact your local library.*
• *For DPS, Division of State Police, pistol permit locations, access www.ct.gov/dps and follow the link to the Special Licensing and Firearms Unit or call (860) 685-8290.*

I. Type of Permit Requested:

Check Box:
☐ Temporary State Pistol Permit
☐ Non-Resident State Pistol Permit
☐ Eligibility Certificate to Purchase Pistols or Revolvers

II. Instructions:

Instructions for Temporary State Pistol Permits:

1. Complete this form (DPS-799-C) and submit to appropriate local authority (local police, resident state trooper or first selectperson, as applicable) along with the below:

   - Completed State and Federal fingerprint cards with $50.00 fee and $19.25 fee payable to DPS
   - Firearms Safety & Use Course Certificate
   - $70.00 payable to the local authority
   - Proof you are legally and lawfully in the United States (i.e., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.)

2. Upon approval, the local authority will issue a Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C), effective for 60 days

3. Within the 60 day period, go to a DPS, Division of State Police, pistol permit location and submit the following:

   - The Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C) issued by the local authority;
   - A completed Application for State Permit to Carry Pistols and Revolvers (DPS-46-C);
   - $70.00 payable to DPS
   - Proof you are legally and lawfully in the United States (i.e., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.)

• *Your photograph will be taken at DPS*

Instructions for Non-Resident State Pistol Permits:

You must hold a valid permit or license to carry a pistol or revolver issued by a recognized United States jurisdiction.

Complete this form and submit to DPS, Division of State Police, pistol permit location along with the below:

- Completed State and Federal fingerprint card with $50.00 fee and $19.25 fee payable to DPS for criminal history background checks
- Firearms Safety & Use Course Certificate
- $70.00 payable to DPS
- Completed Application for State Permit to Carry Pistols and Revolvers form (DPS-46-C).
- Complete DPS-129-C and attach 2x2 color photograph passport style), and the "Authorization for Release of Personal Information" sign and have both notarized.
- A copy of the permit or license to carry a pistol or revolver issued to you by a recognized United States jurisdiction
- Proof you are legally and lawfully in the United States (i.e., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.)

Provide Out of State Pistol Permit Information:

State of Issue:_____

Expiration Date: _____

Permit Number: _____

Instructions for Eligibility Certificates to Purchase Pistols or Revolvers:

Complete this form and submit to DPS, Division of State Police, pistol permit location along with the below:

- Completed State and Federal fingerprint card with $50.00 fee and $19.25 fee payable to DPS for criminal history background checks
- Firearms Safety & Use Course Certificate
- $35.00 payable to DPS
- Application for a State Eligibility Certificate for a Pistol or Revolver (DPS-164-C)
- Proof you are legally and lawfully in the United States (i.e., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.)

III. COMPLETE BELOW: (All Applicants)

A. Contact Information/Identifying Information:

Name of Applicant

Last, Suffix

First, Middle Initial

Provide all other names by which you have been known (Maiden name, Aliases, Nicknames, etc.)
(Attach additional sheet(s), if necessary)

Date of Birth	**Sex**	**Height**	**Weight**	
Month/Day/Year	F M	Ft. In.	Lbs.	**Race:** _____ Use NCIC personal code descriptors for guidance

Place of Birth
City/Town, State

Social Security Number

Country of Citizenship

Alien Reg. Number (If applicable)

Residential Address (List street address. Post office box numbers are not acceptable)
Number/Street
City/Town, State, Zip Code

List Residential Addresses for the Last 7 Years (Attach additional sheet(s), if necessary)
**Any subsequent changes of address must be reported within 48 hours*

1. _____

2. _____

Mailing Address (If different from current residential address above)
Number/Street
City/Town, State, Zip Code

Home Telephone Number
( ) -
Area Code

Motor Vehicle Operators License Number
State of Issue

B. Employment History:

List Employers for the Last 7 Years (Provide employer's name, address and telephone number)
(Attach additional sheet(s), if necessary)

1. _____

2. _____

C. Permit History:

Have you had a firearms permit or permit application from <u>ANY</u> jurisdiction in the United States denied, suspended or revoked? NO YES

If "YES," provide:

Identify the jurisdiction which issued the denial, suspension or revocation: _____

Date of denial, suspension or revocation: _____

The reason for the denial, suspension or revocation: _____

D. Medical History:

Have you been confined in a hospital for mental illness in the past twelve (12) months by order of a Probate Court? ☐NO ☐YES If "YES," explain: (Attach additional sheet(s), if necessary)

Have you been discharged from custody within the past twenty years after having been found Not Guilty of a crime by Reason of a Mental Disease or Defect? ☐NO ☐YES
If "YES," explain: (Attach additional sheet(s), if necessary)

Notice: *DPS herein notifies the applicant that, pursuant to Connecticut General Statutes Sections 29-28 through 29-38b, DPS will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined to a hospital for psychiatric disabilities within the preceding twelve (12) months by order of probate court.*

E. Criminal History:

Have you ever been ARRESTED for any crime, in any jurisdiction? ☐NO ☐YES If "YES," list all arrests, indicating charges, locations, dates of arrest and dispositions. (Attach additional sheet(s), if necessary)

Notice: You are ***not*** required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to C.G.S. 46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. 46b-146), an adjudication as a youthful offender (C.G.S. 54-76o), a criminal charge that has been dismissed or nolled, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon (C.G.S. 54-142a).

With regard to criminal history information arising from jurisdictions other than the State of Connecticut: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to the law of the other jurisdiction. Additionally, you are not required to disclose the existence of an arrest arising from another jurisdiction if you are permitted under the law of that jurisdiction to swear under oath that you have never been arrested.

Have you ever been CONVICTED under the laws of this state, federal law or the laws of another jurisdiction? ☐NO ☐YES If "YES," list all convictions, include charges, location, date of arrest, and disposition. (Attach additional sheet(s), if necessary)

Are you currently on probation, parole, work release, in an alcohol and/or drug treatment program or other pre-trial diversionary program or currently released on personal recognizance, a written promise to appear or a bail bond for a pending court case? ☐NO ☐YES. If "YES," explain. (Attach additional sheet(s), if necessary)

Have you ever been the subject of a Protective Order or Restraining Order issued by a court in a case involving the use, attempted use or threatened use of physical force against another person, regardless of the outcome or result of any related criminal case? ☐NO ☐YES
If "YES," which court issued the order?

F. Military History:

Were you ever a member of the Armed Forces of the United States? ☐NO ☐YES

Were you ever discharged from the Armed Forces of the United States with a less than Honorable Discharge? ☐NO ☐YES.

**If you have ever been a member of the Armed Forces of the United States and have been discharged, attach a copy of your DD-214.*

G. Proof of Training:

**Attach a copy of the letter or certificate attesting that you have completed a course in the safety and use of pistols and revolvers, signed by the pistol or revolver instructor.*

Instructor: (Check Applicable Box)

☐ **National Rifle Association**
☐ **Department of Environmental Protection**
☐ **Other:** _____

State Instructor's Name and ID #: _____

H. Declaration:

I understand that any false statements made herein, which I do not believe to be true and which is intended to mislead a public servant in the performance of their official function, is punishable in Connecticut pursuant to state statute (C.G.S. Sec. 53a-157b). I further understand that any statements in this application that are determined to be false or inaccurate shall constitute grounds for the permit or certificate not to be issued, or if issued before the facts are known, shall be cause for revocation. My signature below attests to the accuracy, completeness, and to the truth of all information supplied on this application.

I declare, under the penalties of False Statement, that the answers to the above are true and correct.

Date: _____ Signed _____

STATE OF _____

Print Name _____

COUNTY OF _____

Subscribed and sworn to before me this _____ day of _____ 20____

_____
Name:
Notary Public
My Commission Expires:
Commissioner of Superior Court

NOTICE: Appeal Process for Permits

In the event that your application to carry pistols or revolvers is denied or your permit is revoked, you may notify the Board of Firearm Permit Examiners, in writing, within ninety (90) days, in order to begin your appeal process. At a hearing before the Board, you may request that your application be reconsidered or that your permit be reinstated. Additionally, in the event that your permit application has not been processed by the local issuing authority within eight (8) weeks, you should notify the Board of Firearm Permit Examiners. Contact Information for the Board of Firearm Permit Examiners: 505 Hudson Street, 5th Floor, Hartford, CT 06106. Telephone (860) 566-7078 or (800) 996-7078.

For Official Use Only:

Application Received:	FBI Sent: ☐No ☐Yes FBI Reply: ☐No ☐Yes ICE Response: ☐No ☐Yes DMHAS: ☐No ☐Yes SPBI: ☐No ☐Yes #_____	**Application Status:** ☐Approved ☐Denied _____ (Signature and title of issuing authority)
☐☐/☐☐/☐☐☐☐ Month/Day/Year		

NOTICE

Pursuant to Connecticut General Statutes, Sections 29-28, 29-32, 29-36f and 29-36l and Federal Public Law 104-208, s. 658: ***applications covered by these instructions will not be issued or be renewed, if:***

You have a FELONY CONVICTION in any jurisdiction:

You have a MISDEMEANOR CONVICTION in Connecticut of one of the following crimes:

1. Illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. 21a-279 (c)
2. Criminally negligent homicide - 53a-58
3. Assault in the third degree - 53a-61
4. Assault of a victim 60 or older in the third degree - 53a-61a
5. Threatening- 53a-62
6. Reckless endangerment in the first degree - 53a-63
7. Unlawful restraint in the second degree - 53a-96
8. Riot in the first degree - 53a-175
9. Riot in the second degree - 53a-176
10. Inciting to riot - 53a-178
11. Stalking in the second degree - 53a-181d

Or you were CONVICTED of a MISDEMEANOR CRIME of DOMESTIC VIOLENCE:
This means an offense that (1) is a misdemeanor under federal or state law; and (2) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, or by a person with whom the victim shares a child in common, or by a person who is cohabiting with or who has cohabited with the victim or spouse, parent, or guardian, or by any person similarly situated to a spouse, parent or guardian of the victim.

You were discharged from custody within the preceding 20 years after having been found NOT GUILTY OF A CRIME BY REASON OF MENTAL DISEASE OR DEFECT 53a-13.

You were CONFINED TO A HOSPITAL for any psychiatric disability (17a-495) within the preceding 12 months by order of a judge of a probate court.

You are subject to a RESTRAINING ORDER or PROTECTIVE ORDER issued by a court in a case involving the use, attempted use or threatened use of physical force.

You are now subject to a Firearms Seizure Order issued pursuant to Public Act 99-212 Sec. 18, prohibiting possession of firearms.

You are an ILLEGAL ALIEN in the United States.

You are UNDER the AGE of 21 years.

You have renounced your United States citizenship.

You have been discharged from the Armed Forces under a dishonorable condition.

You are prohibited by Federal Law Section 922 (g) or (n) of Title 18 of the United States Code.

If you have any questions regarding your status, please inquire at the Special Licensing and Firearms Unit in person or by telephoning the following number: (860) 685-8290

In order to effectuate C.G.S. 29-28, the Department of Public Safety herein notifies the applicant that the Department of Public Safety (DPS) will be notified by the Department of Mental Health and Addiction Services (DMHAS) if the applicant has been confined in a hospital for psychiatric disabilities within the preceding twelve (12) months by order of probate court. The Department of Public Safety will use this information in order to fulfill its obligations under C.G.S. Section 29-28 to 29-38 inclusive.

Visit our web site at: ***www.ct.gov/dps***