	APPLICATION FOR CONCEALED PISTOL/REVOLVER LICENSE				
To the s	(This application must be completed in ink or by typewriter)	6			
	heriff of County, I, the below named applicant, swear/affirm, under penalty	of la	w, that		
the info	mation contained within this application is true and correct to the best of my knowledge.				
DATE SU	BMITTED:/ APPLICATION TYPE: \Box Initial \Box Renewal \Box Honorably Discharged LEO \Box Sher	riff W	aived		
NAME:	CONTACT #:				
-	Last First Middle				
ADDRES	:				
	Street City State Zip				
DOB:	/SSN:PLACE OF BIRTH:				
COUNTR	Y OF CITIZENSHIP: ALIEN/ADMISSION #: (If no	ot US ci	tizen)		
HT:	FtIn. WT: RACE: SEX: DM DF EYES: HAIR:				
SCARS, N	IARKS, AND/OR TATTOOS (Description and location):				
	na fide resident of county, WV and present the following original, valid WV issued photo	o ID in	support		
	sertion (Photocopy of ID must be attached to this application):				
WV D	iver's License#				
Answer	each of the following questions by checking <u>YES</u> or <u>NO</u> :				
QUESTIC	N	YES	NO		
1.	Are you under 21 years of age? If yes Provisional Application form 44C must be completed				
2.	2. Are you addicted to alcohol, a controlled substance or drug, or are you an unlawful user thereof?				
3.	3. Have you been convicted of a felony?				
4.	. Have you been convicted of an act of violence or an act of Domestic Violence?				
5.	Are you under indictment or do you have any criminal charges pending against you?				
6.	Are you currently serving a sentence of confinement, parole, probation or other court ordered supervision due to a				
	charge of domestic violence as provided for in 61-2-28 of the Code of West Virginia?				
7.	Are you the subject of a restraining order as a result of a domestic violence act as defined in 61-2-28 of the Code of				
	West Virginia or subject to a verified petition of domestic violence or subject to a protective order as provided for in				
	48-2a of the Code of West Virginia?				
8.	Have you ever been adjudicated to be mentally incompetent?				
9.	Do you have two (2) or more convictions for DUI related offenses?				
10. In the last three (3) years prior to this application, have you been in a residential or court ordered treatment facility for					
	alcoholism and /or alcohol/drug detoxification treatment?				
11.	If you are applying for a license to carry a concealed handgun, have you qualified under the minimum requirements for				
	the handling and firing of a handgun as set forth in 61-7-4 of the Code of West Virginia? If YES, attach a copy of the				
	certificate of completion to this application. The Sheriff will determine applicability of this section to Retired Law				
	Enforcement Officers and Renewal Applicants.				
12.	Are you physically and mentally competent to carry a handgun				

WEST VIRGINIA STATE POLICE

NOTE: If any of questions 2-10 listed above are answered YES, then a brief letter of explanation for each question must accompany this form.

I hereby authorize the Sheriff of ______ County, to conduct an investigation into information contained in this application. Furthermore, I understand that the falsification of any information contained within this application constitutes false swearing and is a misdemeanor punishable under the provisions of 61-5-2 of the Code of West Virginia.

Applicant's Signature X_____ Date _____ Date _____

WEST VIRGINIA STATE POLICE

APPLICATION FOR CONCEALED PISTOL/REVOLVER LICENSE

(This application must be completed in ink or by typewriter)

- 1. The applicant will complete the form (ink or type) and affix his/her signature which must be witnessed by a notary.
- 2. The completed form will be presented to the Sheriff of the applicant's resident county accompanied by the required \$75.00 application fee.
- 3. The Sheriff will conduct an investigation relative to the information contained in the application as required by state law. Any request for criminal history information from the State Police will be made using established protocol.
- 4. Upon completion of the investigation and if a license to carry a concealed pistol/revolver is approved and issued, the applicant will pay to the Sheriff an additional \$25.00 fee. The Sheriff will immediately forward to the State Police a certified copy of the approved application and will forward within thirty (30) days the \$25.00 fee to the following address:
 - Superintendent West Virginia State Police Attention: Concealed Weapon Registry 701 Jefferson Road South Charleston, WV 25309-1698

NOTE: Fees waived for the following officials effective July 1, 2013:

Any justice of the Supreme Court of Appeals of West Virginia; any circuit judge; any retired justice or retired circuit judge designated senior status by the Supreme Court of Appeals of WV; any family court judge; any magistrate; any prosecuting attorney; any assistant prosecuting attorney; or any duly appointed investigator employed by a prosecuting attorney.

NOTE: No application will be accepted without the NICS Transaction Number listed.

NOTE: When forwarding the \$25.00 fee to the West Virginia State Police, the Sheriff must provide the name, date of birth and date of application approval for each \$25.00 fee remitted. **NOTE:** Provisional license will expire at age 21.

Applicant Name: _____

Applicant DOB: Phon	e contact:
Subscribed and sworn before me, in said County and State, this the day of , 20	
My commission expires:	STATE ID No NICS Check:
Notary public signature	NICS TRANSACTION No.(NTN): NOTE: Application will be returned without NTN#
SEAL:	l,,
	Sheriff of County, WV certify this document to be a true and accurate copy of the APPROVED APPLICATION for a Concealed Pistol/Revolver Permit for the person identified
Date application received://	herein and have issued a permit as required by law.
Received by:	Signature /
SHERIFF DEPARTMENT USE ONLY	Approval Date Expiration Date