



**MINNESOTA UNIFORM FIREARM APPLICATION
PERMIT TO CARRY A PISTOL
(TYPE OR PRINT ONLY)
THIS APPLICATION MUST BE SUBMITTED IN PERSON**

CHECK TYPE	
<input type="checkbox"/>	NEW
<input type="checkbox"/>	RENEWAL
<input type="checkbox"/>	PERSONAL DATA CHANGE
<input type="checkbox"/>	REISSUE
<small>NOTE: PERSONAL DATA CHANGE/REISSUE APPLICANTS NEED ONLY COMPLETE REQUIRED PERSONAL DATA AND SIGN WHERE INDICATED.</small>	

NOTICE TO APPLICANT: An incomplete application will be **denied**. In the event an applicant is found to have knowingly falsified this application, or omitted pertinent information, that person may be subject to criminal prosecution. The waiting period will begin on the date that this application is submitted.

DATA PRACTICES ADVISORY

The Minnesota Data Practices Act requires that you be advised of the following information:

As an applicant for a permit to carry a pistol, you are being asked to provide private and/or confidential data about yourself which will be used to check criminal histories, arrest records, and warrant information to determine your eligibility to possess a firearm and/or carry a pistol.

You may refuse to provide this information; however, should you refuse, the investigation cannot be completed and will result in your application not being processed. The information that you provide will be used by the licensing agency to complete its investigation, and may be conveyed to other law enforcement agencies.

I HAVE READ AND UNDERSTAND THE ABOVE DATA PRACTICES ADVISORY.

SIGNATURE:	DATE:
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AUTHORIZATION FOR RELEASE OF COMMITMENT INFORMATION

As an applicant for a permit to carry a pistol, you are being asked to authorize the release of commitment information maintained by the Commissioner of Human Services, or any similar agency or department of another state where the applicant has resided, which will be used to determine your eligibility to carry a pistol. You may refuse to provide this authorization; however, should you refuse, the investigation cannot be completed and will result in your application not being processed.

I, (type or print your name) _____ authorize the Commissioner of Human Services to disclose commitment information, to the extent the information relates to my eligibility to carry a pistol, to the local law enforcement authority reviewing this application for the purpose of conducting the background investigation required by Minnesota State Statute 245.041.

SIGNATURE:	DATE:
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NOTE: This consent is subject to revocation at any time except to the extent that the Commissioner of Human Services has already taken action in reliance on it. If not previously revoked, this authorization will terminate 5 years after the date it was signed by the applicant or upon notification to the applicant of the denial of this application, whichever occurs first.

REQUIRED PERSONAL DATA

NAME (LAST, FIRST,MIDDLE,JR/SR):				DATE OF BIRTH:	TELEPHONE NUMBER:
MAIDEN NAME (IF APPLICABLE) OR OTHER NAMES YOU HAVE USED:					
PRESENT RESIDENCE ADDRESS:			CITY:	COUNTY:	STATE: ZIP CODE:
SEX:	HEIGHT:	WEIGHT:	EYE COLOR:	HAIR COLOR:	STATE: DRIVER'S LICENSE, STATE ID OR PASSPORT NUMBER:
DISTINGUISHING PHYSICAL CHARACTERISTICS (INCLUDING SCARS, MARKS, TATTOOS, ETC):					

PREVIOUS RESIDENCE (PAST 10 YEARS)

DATE	COUNTY	STATE	DATE	COUNTY	STATE

RESTRICTIONS

The following statutes describe persons that are prohibited from possessing a firearm:

- Minnesota Statute §518B.01, subdivision 14 - Violation of an Order for Protection.
- Minnesota Statute §609.224, subdivision 3 - Assault in the 1st through 5th Degree with firearms.
- Minnesota Statute §609.2242, subdivision 3 - Domestic assaults with firearms.
- Minnesota Statute §609.749, subdivision 8 - Harassment; Stalking; Firearms.
- Minnesota Statute §624.713 - Certain persons not to have pistols or semiautomatic military-style assault weapons.
- Minnesota Statute §624.719 - Possession of a firearm by non-resident alien.
- Minnesota Statute §629.715, subdivision 2 - Surrender of firearms as condition of release.
- Minnesota Statute §629.72, subdivision 2 - Judicial review that prohibits person from possessing a firearm.
- Minnesota Statute 299C.091 - Listed in the criminal gang investigation system.

Note: Federal laws, not listed herein, may also prohibit possession of a firearm for certain persons.

I HEREBY STATE TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT I AM NOT PROHIBITED BY LAW FROM POSSESSING A FIREARM.

SIGNATURE:

DATE:

FOR OFFICE USE ONLY

The Applicant must submit the following items with this application:

- A completed application form, signed and dated by the Applicant;
- An accurate photocopy of a certificate, affidavit, or other document that is submitted as the Applicant's evidence of training in the safe use of a pistol that meets the requirements of Minnesota Statute §624.714;
- An accurate photocopy of the Applicant's current driver's license, state identification card, or the photo page of the Applicant's passport.
- In addition to the other application materials, a person who is otherwise ineligible for a permit due to a criminal conviction but who has obtained a pardon or expungement setting aside the conviction, sealing the conviction, or otherwise restoring applicable rights, must submit a copy of the relevant order.

NOTICE OF REVOCATION

Permit, if granted, shall be void at the time the holder becomes prohibited from possession of a pistol under Minnesota Statutes, in which event the holder must immediately return the permit to the issuing Sheriff's Office.

CHANGE OF ADDRESS/LOSS OR DESTRUCTION OF PERMIT

Within 30 days after changing permanent address, or within 30 days of having lost or destroyed the permit card, the permit holder must notify the issuing Sheriff's Office of the change, loss, or destruction.

If card is lost or destroyed, permit holder must provide a notarized statement that the card has been lost or destroyed.

Failure to provide notification as required by this subdivision is a petty misdemeanor.

DENIAL

This application is denied based on the following reason(s):

Sheriff's Office



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RECEIPT

I HEREBY ACKNOWLEDGE ACCEPTANCE OF THE PERMIT TO CARRY APPLICATION OF:

(Name of Applicant)

Date: _____ Time: _____

Amount Received: _____ Form of Payment _____

Signature of person accepting application

Issuing Sheriff's Office

This receipt *DOES NOT* constitute a permit to carry a pistol.