

In accordance with the provisions of Massachusetts General Law, c140, s.129B(9) and s.131(1), please be advised that your Massachusetts license to carry firearms and/or firearms identification card will expire shortly.

ANY PERSON IN POSSESSION OF A FIREARM, RIFLE OR SHOTGUN WHOSE LICENSE IS INVALID FOR THE SOLE REASON THAT IT HAS EXPIRED, BUT WHO SHALL NOT BE DISQUALIFIED FROM RENEWAL UPON APPLICATION SHALL BE SUBJECT TO A CIVIL FINE OF NOT LESS THAN \$500 NOR MORE THAN \$5,000 (c140, s. 131m).

New applicant or renewal applicant: Please complete this Renewal Application Form and take it to your LOCAL LICENSING AUTHORITY (Local Police Department.) DO NOT MAIL TO THE FIREARMS RECORD BUREAU

APPLICATION FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY FIREARMS (MGS c140, s. 129B and s.131)

Check the type of license you are applying for:

- FIREARMS IDENTIFICATION CARD RESTRICTED (MACE/PEPPER SPRAY)
- FIREARMS IDENTIFICATION CARD
- CLASS B LICENSE TO CARRY FIREARMS NON-LARGE CAPACITY
- CLASS A LICENSE TO CARRY FIREARMS LARGE CAPACITY... CHECK IF CLUB LICENSE

** If new license (issued after June 1, 1998), a copy of the firearms safety certificate or hunter safety course certificate must be attached to this application.

(Except for signature, print or type all requested information)

City/Town of: _____, MA First Issue ** Renewal

If a renewal, current number: _____ Expiration Date: _____

City/Town that issued current license: _____, MA

Last Name: _____ First: _____ Middle: _____

Physical Address: _____

Phone: _____

If Club License Address of Club: _____

Phone: _____

Date of Birth: _____ Place of Birth: _____

Mother's Maiden Name: _____ Father's Name: _____

Height: _____ Weight: _____ Build: _____ Complexion: _____

Hair Color: _____ Eye Color: _____ Occupation: _____

Social Security # (Optional) _____ Driver's License Number: _____

Employed By*: _____ Business Address: _____

Phone: _____ **If issued for employment purposes, letter from employer on company letterhead requesting issuance and reason must accompany application.*

ANSWER THE FOLLOWING FOURTEEN QUESTIONS ACCURATELY

1. Are you a citizen of the United States? _____
If naturalized give date, place and naturalization number: _____
2. Have you ever used or been known by another name? _____ If yes provide name and explain:

3. What is your age?* _____ * You must be 21 years of age to apply for a license to carry firearms, 18 years of age to apply for a firearms identification card. 15 years of age, but less than 18 years of age with submission of a certificate of parent or guardian granting permission to apply for a firearms identification card.
4. Have you ever been convicted of a felony? _____
5. Have you ever been convicted of the unlawful use, possession, or sale of narcotic or harmful drug as defined in MGL c.94C? _____
6. Have you ever been convicted of a crime punishable by more than (1) one year? _____
7. In any state or federal jurisdiction have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child for the commission of (a) a felony; (b) a misdemeanor punishable by imprisonment for more than 2 years; (c) a violent crime as defined in MGL C140, s.121; (d) a violation of any law regulation the use, possession, ownership, sale, transfer, rental, receipt or transportation of weapons or ammunition for which a term of imprisonment may be imposed; or (e) a violation of any law regulating the use, possession or sale of controlled substances as defined in section 1 of MGL 94C? _____
8. Have you ever been confined to any hospital or institution for mental illness? _____
9. Are you or have you ever been under treatment for or confinement for drug addiction or habitual drunkenness? _____
10. Have you ever appeared in any court as a defendant for any criminal or traffic offense?

11. Are you now under any charge(s) for any offense(s) against the law? _____
12. Are you now or have you ever been the subject of a MGL C209A restraining order or involved in a domestic violence charge? _____
13. Has any license to carry firearms, permit to possess firearms, or firearms identification card issued under the laws of any state or territory ever been suspended, revoked or denied? _____
14. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction?

If you answered "YES" to any of the questions four through fourteen, give details which must include dates, circumstances and location: _____

(If necessary use separate sheet of paper to complete)

Other than Massachusetts, what states have you resided in? _____

Have you ever held a license to carry in this or any other state? _____

If "YES" when, where and license number: _____

Have you ever been issued a firearms identification card? _____ If so, what was the number and issuing department: _____

List name and addresses of two references:

1. _____
2. _____

Reason(s) for requesting the issuance of card or license: _____

*** WARNING *** ANY PERSON WHO KNOWINGLY FILES AN APPLICATION CONTAINING FALSE INFORMATION SHALL BE PUNISHED BY A FINE OF NOT LESS THAN \$500 NOR MORE THAN \$1,000 OR BY IMPRISONMENT FOR NOT LESS THAN 6 MONTHS NOR MORE THAN 2 YEARS IN A HOUSE OF CORRECTION, OR BY BOTH SUCH FINE AND IMPRISONMENT (MGL c.140, s.131).

I DECLARE THE ABOVE FACTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND I UNDERSTAND THAT ANY FALSE ANSWER(S) WILL BE JUST CAUSE FOR DENIAL OR REVOCATION OF MY LICENSE TO CARRY FIREARMS AND MAY BE USED IN A CRIMINAL PROCEEDING PURSUANT TO MASSACHUSETTS GENERAL LAW CHAPTER 140, SECTION 129 AND 131.

SIGNED UNDER THE PENALTIES OF PERJURY THIS _____ DAY OF _____, _____

SIGNATURE OF APPLICANT: _____

Applicant: Bring this to your local licensing authority (Police Department) DO NOT MAIL TO THE FIREARMS RECORD BUREAU.

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LICENSING AUTHORITY (LOCAL POLICE DEPARTMENT) – RETAIN ONE COPY FOR YOUR FILES, PLEASE FORWARD ONE COPY TO THE FIREARMS RECORD BUREAU WITH THE COMPLETED LTC OR FID FOR DATA ENTRY and ONE COPY TO THE MASS STATE POLICE WITH THE APPLICANT’S FINGERPRINT CARD FOR APPROPRIATE FINGERPRINT SUPPORTED CRIMINAL RECORD CHECK.

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