PISTOL PERMITS ARE PROCESSED BY APPOINTMENT AT THE FIRST SELECTMAN'S OFFICE

How to Apply (NEW STATE PROCESS EFFECTIVE JULY 2021)

- **Obtain application and schedule appointment:** Permits applications are processed with the Selectman's Office. You may schedule an appointment by calling 860-642-6100 or by emailing bdennler@lebanonct.gov
- Complete and notarize application form (see file attachment at bottom of page) along with all specified identification. Notary services may not be consistently available at Town Hall due to changed COVID19 operations. Most banks also have a notary on staff, and they may or may not charge a fee. Do not fill out the "declaration" section of the back page of this document until you are in the presence of a notary. Bring the following with you when you apply:

Check, cash, or money order in the amount of \$70.00 Made out to "The Town of Lebanon"
Drivers License (must present the original at time of application)
Hand Gun Safety Course Certificate
Birth Certificate or Passport

- **Sign fingerprint privacy rights documents:** The privacy rights requirement can be downloaded here and reviewed ahead of time. You must sign and date both documents at the bottom and return them to the Selectman's Office. Once your privacy rights documents and application packet are received, you will be given a pre-enrollment code. These documents are also available in-person at Town Hall.
- **Pre-enroll with Connecticut Criminal History Request System (CCHRS) online:** You must use the pre-enrollment code provided by the Selectman's Office to enroll. This is required to obtain your fingerprints. You must pay the state two fees of \$75.00 and \$13.25 for processing of your fingerprints at this time. You will be given a barcode which you must bring with you to your fingerprinting destination.
- **Complete state fingerprint process:** Electronic scans can be obtained at Troop K in Colchester and will be submitted directly by the fingerprinting agency. Background checks will typically be returned in less than eight weeks.

After your background check is received, you will be notified when your Temporary Local Pistol Permit is ready to be picked up. The Temporary Permit must be picked up and signed in-person by the applicant with a current photo ID.

Temporary Local Pistol Permits are valid for 60 days and cannot be renewed. You must reapply to local authority if expired without obtaining your State Permit. Your Temporary Permit is valid to carry firearms only — NOT valid for purchase of firearms.

Please contact the Selectmen's Office at 860-642-6100, or email BDENNLER@LEBANONCT.GOV to schedule your appointment or if you have questions. Walk-ins will be accommodated based on availability of staff authorized to process the applications.

WHO CANNOT LEGALLY POSSESS, CARRY, OR GET CREDENTIALS FOR HANDGUNS UNDER STATE LAW

Anyone who wants to possess or carry handguns or get an eligibility certificate or permit to carry them in Connecticut must complete a DPS-approved handgun safety and use course, and undergo state and national criminal history record checks. With regard to the permit, the local official (who issues temporary permits to permit applicants) must consider if the applicant (1) wants the firearm for lawful purposes and (2) is a suitable person to get a permit. The law does not define suitability, which is left to the official's discretion (CGS § 29-28(b)).

The following people cannot possess handguns or get the credentials—illegal aliens and anyone:

- 1. discharged from custody in the preceding 20 years after a finding of not guilty of a crime by reason of mental disease or defect;
- 2. confined by the probate court to a mental hospital in the 12 months before applying for a permit or certificate;
- 3. convicted of a serious juvenile offense;
- 4. subject to a firearm seizure order issued after notice and a hearing;
- 5. prohibited under federal law from possessing or shipping firearms because they were adjudicated as mental defectives or committed to a mental institution (except in cases where the Treasury Department grants relief from this disability);
- 6. under a protective or restraining order for using or threatening to use force and in the case of possession, he or she knows about the order and if the order was issued in-state, he or she was notified and given a hearing opportunity; or
- 7. convicted of any felony or specified misdemeanors (CGS §§ 29-28, 29-36f and 53a-217c).

Disqualifying misdemeanors are:

- 1. criminally negligent homicide (excluding deaths caused by motor vehicles) (CGS § 53a-58);
- 2. third-degree assault (CGS § 53a-61);
- 3. third-degree assault of a blind, elderly, pregnant, or mentally retarded person (CGS § 53a-61a);
- 4. second-degree threatening (CGS § 53a-62);
- 5. first-degree reckless endangerment (CGS § 53a-63);
- 6. second-degree unlawful restraint (CGS § 53a-96);
- 7. first-degree riot (CGS § 53a-175);
- 8. second-degree riot (CGS § 53a-176);

- 9. inciting to riot (CGS § 53a-178);
- 10. second-degree stalking (CGS § 53a-181d); and
- 11. first offense involving possession of (a) controlled or hallucinogenic substances (other than a narcotic substance or marijuana) or (b) less than four ounces of a cannabis-type substance (CGS § 21a-279(c)).



Special Licensing and Firearms Unit



PISTOL PERMIT/ELIGIBILITY CERTIFICATE APPLICATION

(Pursuant to C.G.S. §§ 29-28 et. seq., 29-36 et. seq., and 53a-217 et. seq.)

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 or through your local library.				
Type of Permit Requested:				
Check Box: Go Day Temporary State Pistol Permit Non-Resident State Pistol Permit Eligibility Certificate to Purchase Pistols or Revolvers Eligibility Certificate to Purchase Long Guns				
	Instructions:			
Instructions for State Pistol Permits:	Instructions for Non-Resident State Pistol Permits:	Instructions for Eligibility Certificates to Purchase Pistols or Revolvers and/or Eligibility Certificates to Purchase Long Guns:		
 Complete this form (DPS-799-C) and submit to appropriate local authority (local police, resident state trooper or first select person, as applicable) along with all of the following: Firearms Safety & Use Course Certificate; \$70.00, fee, payable to the local authority; and Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.). Submit fingerprints for a criminal history check through a law enforcement agency. Fees include a \$75.00 fee and a \$13.25 fee, payable at the agency where the prints are taken. Fees must be paid by separate checks. Upon approval, the local authority will issue a Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C), effective for 60 days. Within the 60 day period, go to a DESPP, 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 fee, payable to Treasurer, State of Connecticut; Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.); and Proof of valid state issued photo identification 	**CALL DESPP FOR PACKET** 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 DESPP, Division of State Police, pistol permit location along with all of the following: Completed State of CT and Federal fingerprint card with \$75.00 fee and \$13.25 fee, payable to Treasurer, State of Connecticut for criminal history background checks; Firearms Safety & Use Course Certificate; \$70.00 fee, payable to Treasurer, State of Connecticut; Completed Application for State Permit to Carry Pistols and Revolvers form (DPS-46-C); Completed DPS-129-C signed and notarized and 2x2 color photograph (passport style); 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 (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.);and Proof of valid state issued photo identification card. Out of State Pistol Permit Information: State of Issue:	1. Complete this form and submit in person at DESPP Headquarters, Division of State Police, located at 1111 Country Club Road, Middletown, Connecticut along with the below: Firearms Safety & Use Course Certificate; S35.00 fee, payable to Treasurer, State of Connecticut; Application for a State Eligibility Certificate for a Pistol or Revolver or for Long Guns (DPS-164-C); Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.); and Proof of valid state issued photo identification card. 2. Submit fingerprints for a criminal history check through a law enforcement agency. Fees include a \$75.00 fee and a \$13.25 fee, payable at the agency where the prints are taken. Fees must be paid by separate checks. 3. Upon approval, your photograph will be taken at DESPP and you will be issued an eligibility certificate.		
card. 5. Upon approval, your photograph will be taken at DESPP and you will be issued a state pistol permit.	Expiration Date: Permit Number:			

For Department of Emergency Services and Public Protection (DESPP), Division of State Police, pistol permit locations, access www.ct.gov/despp and follow the link to the Special Licensing and Firearms Unit or call (860) 685-8290. Note: All payments must be made with separate checks.

Contact / Identifying Information:		
Name of Applicant		
Last Suffix		
L L L L L L L L L L		
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 Eye Color Blue Black Green Gray Hazel		
Race Hair Color		
White American Indian/Alaskan Native Asian/Pacific Islander □ Brown □ Black □ Blonde □ Regular of the standar of the standard	ed.	
Place of Birth Social Security Number (Optional, but will h	ielp	
City/Town State prevent misidentification)		
Country of Citizenship Alien Reg. Number (If applicable)		
Residential Address (List street address. Post office box numbers are not acceptable)		
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 to the Special Licensing and Firearms Unit		
1		
2		
Mailing Address (If different from current residential address above)		
Number/Street		
City/Town State Zip Code Home Telephone Number Motor Vehicle Operator's License Number City/Town State Zip Code City/Town City/T		
Area Code State of Issue		
Alternate Telephone Number		
(LILILI) LILILII Area Code		
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		
Permit or Eligibility Certificate History:		
Have you had a firearms permit, permit application or eligibility certificate of any kind from ANY jurisdiction in the United States denied, suspended or revoked? $\square NO \square YES$		
If "YES," provide:		
1. Identify the jurisdiction which issued the denial, suspension or revocation:		
2. Date of denial, suspension or revocation:		
3. The reason for the denial, suspension or revocation:		

Medical History:		
Have you been confined in a hospital for mental illness in the past sixty (60) months by order of a Probate Court? NO TES 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)		
Have you been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence? NO YES If "YES," explain: (Attach additional sheet(s), if necessary)		
Notice: DESPP herein notifies the applicant that, pursuant to C.G.S. §§ 29-28 through 29-38b, DESPP 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 sixty (60) months by order of Probate Court, or if the applicant has been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence. 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 <u>pursuant to the law of the other jurisdiction</u> . 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 TYES 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)		
Within the past five (5) years, have you 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? \square NO \square YES		
If "YES," which court issued the order?		
Military History:		
Were you ever a member of the Armed Forces of the United States? NO YES (If yes, please include a copy of your DD-214)		
Were you ever discharged from the Armed Forces of the United States with a <u>less than</u> Honorable Discharge? ☐NO ☐YES		

		Dreef of	Training	
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 or long guns (as appropriate, depending upon which permit or certificate you are requesting), signed by the instructor of the course. Instructor: (Check applicable box)				
☐ National Rifle Association ☐ Department of Energy and Envi ☐ Other:			EP)	
State Instructor's Name and ID Nu	ımber:			
		Declar	ation:	
I understand that any false statement herein, which I do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function, is punishable by law (See C.G.S. § 53a-157b). I further understand that any statement in this application that is determined to be false or inaccurate shall constitute grounds for the denial of such application. If approved before the facts are known, such approval shall be void if based on a false or inaccurate statement. 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	Sign	ed		
STATE OF				
	Print	Name		
COUNTY OF	<u> </u>			
Subscribed and sworn to before	e me this d	av of		20
	J a a a	ay o		
		Name:		
		Notary My Con	Public nmission I	Eynires:
				Superior Court
	NOTICE: A	ppeal Pro	ocess fo	or Permits
Board of Firearms Permit Examir 256-2947, in writing, within ninety	ners, at 165 Car y (90) days, in c	oitol Ave., order to be	Suite 10 gin your	ficate is denied or revoked, you may notify the 070, Hartford, CT 06106. Telephone: (860) r appeal process. At a hearing before the hat your permit or eligibility certificate be
	F	or Official L	Jse Only:	
Application Received:	FBI Sent:		Yes	Application Status:
	FBI Reply:		Yes	Approved Denied
│ └─│└─│/ └─│	ICE Response:	∐No ∐	Yes	
	DMHAS: SPBI:	= =	Yes	(O) (1 (1) (1) (1) (1) (1) (1) (1) (1) (1)
	Number:	∐No ∐	Yes	(Signature and title of issuing authority)

Requesting Entity:		
FBI Privacy Act S	tatement	
Authority: The FBI's acquisition, preservation, and exchangenerally authorized under 28 U.S.C. 534. Depending on authorities include Federal statutes, State statutes pursuant to and federal regulations. Providing your fingerprints and associated so may affect completion or approval of your application.	the nature of your application, supplemental Pub. L. 92-544, Presidential Executive Orders,	
Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.		
Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.		
	As of 03/30/2018	
Note: This privacy act statement is located on the	back of the FD-258 fingerprint card.	
SIGNATURE DATE		
This document must be retaine	l by the Entity.	

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such
as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have
certain rights which are discussed below. All notices must be provided to you in writing. 1 These obligations are pursuant to the

• You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later), by the agency that will receive your criminal history results, when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained. ²

Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12,

- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identityhistory-summary-checks and https://www.edo.cjis.gov.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

Updated 11/6/2019

If you need additional information or assistance, please contact:

Requesting Entity: ___

among other authorities.

Connecticut Records: **Department of Emergency Services and Public Protection State** Police Bureau of Identification (SPBI) 1111 Country Club Road Middletown, CT 06457 860-685-8480

Out-of-State Records: Agency of Record OR FBI CJIS Division-Summary Request 1000 Custer Hollow Road Clarksburg, West Virginia 26306

SIGNATURE	DATE
SIGNATURE	DATE
i e e e e e e e e e e e e e e e e e e e	

This document must be retained by the Entity.

¹ Written notification includes electronic notification, but excludes oral notification.

² See https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).