THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE
OF PUBLIC SAFETY AND SECURITY
Department of Criminal Justice Information Services
mass.gov/firearms-services

PD USE ONLY
FTN: _____
LIC #: _____

Submit this form and direct any questions to your local police department

LICENSE APPLICATION
RESIDENT FIREARMS LICENSE APPLICATION

CHECK ONE:

__ New Applicant

__ Renewal - most recent license number: _____

If application is for a first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached, unless exempt by statute. If this is a renewal application, a lost/stolen firearms affidavit must be submitted.

LICENSE APPLICATION TYPE (check only one):

__ Self-Defense Spray Permit

__ Firearms Identification Card

__ License to Carry

__ License to Possess Stun Gun Only

__ License to Possess a Machine Gun

__ Gun Club License (only the Colonel of the State Police can issue a gun club license)

EXCEPT FOR SIGNATURE, PRINT OR TYPE ALL REQUESTED INFORMATION:

Last Name | First Name | Middle Name | Suffix

Residential Address | City | State | Zip Code | Telephone Number

Mailing Address | City | State | Zip Code | Telephone Number

Date of Birth | Place of Birth (City, State, Country) | Email address

Mother's First Name | Mother's Maiden Name | Father's First Name | Father's Last Name

Height | Weight | Gender | Race | Ethnicity | Hair Color | Eye Color

Occupation | Social Security Number (Optional) | Drivers License Number

Employed By | Business Address

City/Town | State | Zip | Telephone Number

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1. Are you a citizen of the United States?
☐ YES ☐ NO

If lawful permanent resident alien, give green card number and resident date

Green Card Number _____ Resident Since (date) _____

If naturalized, give date, place and naturalization number

Date _____ Place _____ Naturalization No. _____

2. What is your age? _____

3. Have you ever been arrested, summonsed, or appeared in court as a defendant for any criminal offense?
☐ YES ☐ NO

4. Are you the subject of any pending criminal charges?
☐ YES ☐ NO

5. Have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child in any state or federal jurisdiction?
☐ YES ☐ NO

6. Have you ever been the subject of a restraining order or criminal harassment order issued by a Massachusetts court or by a court in another jurisdiction?
☐ YES ☐ NO

7. Have you ever been committed by a court to a hospital for mental illness, or alcohol or substance abuse?
☐ YES ☐ NO

8. Has any firearms license issued to you by any state or territory ever been suspended, revoked, or denied?
☐ YES ☐ NO

9. Have you been dishonorably discharged from the armed forces of the United States?
☐ YES ☐ NO

10. Have you ever been the subject of an order of any court appointing a guardian or conservator?
☐ YES ☐ NO

If you answered "YES" to any of the questions 2-10, give details including dates, circumstances and location; use a separate sheet of paper if necessary.

Have you ever used or been known by another name?

☐ YES ☐ NO

If "YES", provide name and explain: _____

_____

Other than Massachusetts, in what state(s), territory(ies), or jurisdiction(s) have you lived?

☐ NONE

_____

_____

Have you ever held a firearms license in any other state, territory or jurisdiction?

☐ YES ☐ NO

If "YES", please indicate which state(s):_____

_____

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 (M.G.L c.140, §§ 129B(8), 131(h)).

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. I understand that filing an application that contains false information is a criminal offense.

Signed under the penalties of perjury this _____ day of _____ _____

day month year

Signature of Applicant: _____

Massachusetts Firearms License Affidavit (applies to renewals for all license types)

Complete this form **only** if you are **renewing** your firearms license.

License Holder Name: _____

Current Firearms License Number: _____

Please select one:

A. ☐ No firearm(s) lost or stolen since previous issuance of firearms license

1. I am renewing my Massachusetts firearms license.

2. I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last license.

OR

B. ☐ Firearm(s) reported lost or stolen since previous issuance of firearms license

1. I am renewing my Massachusetts firearms license.

2. I have lost one or more firearms or have reported stolen one or more firearms since the renewal or issuance of my last firearms license.

List all lost or stolen firearms below; use additional sheets as necessary.

Lost or Stolen	Date Reported Lost or Stolen	Reported to (Police Dept.)	Type	Make	Model	Serial Number	Case Number

The above information is true and accurate to the best of my knowledge and belief.

SIGNED UNDER THE PENALTIES OF PERJURY:

Signature:_____ Date:_____

PRIVACY ACT STATEMENT – CIVIL FINGERPRINTING

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

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.

Applicant Notification and Record Challenge

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. You can find additional information on the FBI website at https://www.fbi.gov/about-us/cjis/background-checks.