



**RIDGEFIELD POLICE DEPARTMENT**  
**Temporary Pistol Permit/Eligibility Certificate**  
**Instructions & Application Packet**  
**RIDGEFIELD RESIDENTS ONLY**

- Step 1:** Take a State of Connecticut approved firearms safety course.
- Step 2:** Complete application packet (form DPS-799-C is below). Packets are also available in the Police Department lobby.
- Step 3:** Drop-off completed application packet and \$70 application fee to the Ridgefield Police Department, 76 East Ridge Rd. & include the following documents:
  - Completed & Notarized State Form DPS-799-C
  - Signed FBI Privacy Act form (2 sheets)
  - Driver's License or State-Issued ID showing proof of Ridgefield residency
  - Proof you are legally and lawfully in the United States, with one of the following:
    - U.S. Passport
    - Original or Certified Birth Certificate
    - Other documentation issued by I.C.E.
  - Copy of DD-214 if you have ever been a member of the Armed Forces and have been discharged
  - \$70.00 fee: Cash, Check or Money Order made out to Ridgefield Police Department
  - Certificate from approved firearm safety course must be dated no earlier than 2 years from application.
  - Two copies of a recent color photograph (head and shoulders) at least 2" x 2". Passport photo not required.
- Step 4:** A member of the Ridgefield Police Detective Bureau will contact you to arrange a time for fingerprinting. You will be issued a service code to enter when you pre-enroll with the State Police for your CT Criminal History Check.
  - Enter the service code here: <https://ct.flexcheck.us.idemia.io/cchrspreenroll>
  - The State will issue an Applicant Tracking Number. Print that tracking number and bring it with you to the police department to be fingerprinted.
  - Bring a signed FBI Privacy Act form, and a valid government issued photo ID.
- Step 5:** Upon successful completion of the application paperwork, payment & background check, you are issued a Temporary State Permit from the Ridgefield Police Chief. A copy will be sent to the State Police for you.

Within 60 days of receiving your temporary permit, you then apply directly to the State Police for the State of Connecticut Permit to Carry Pistols and Revolvers using information sheet and forms DPS-769-C <https://portal.ct.gov/-/media/despp/csp/files/dps-769-c.pdf>. Processing information is listed on the State Police form.

**Additional Details on the Temporary State Permit to Carry Pistols and/or Revolvers:**

- The Temporary Permit is valid for 60 days. It allows the holder of the permit, to lawfully possess a pistol and/or revolver in the State of Connecticut in accordance with statute.
- The Temporary Permit DOES NOT allow the holder to purchase firearms.
- During the 60 days that the Temporary Permit is valid, the holder of the permit may apply for a State Permit to Carry a Pistol and/or Revolver at any of the Department of Public Safety processing locations as listed on the state website. See pdf attachments below.
- The temporary permit MAY NOT BE RENEWED. If it expires prior to the holder obtaining a State Permit, the holder must re-apply for a new Temporary Permit.

**Refusal To Grant Temporary State Pistol Permit - CGS 29-28(b)**

Connecticut General Statute 29-28(b) states, "The issuing authority shall find that such applicant intends to make no use of any pistol or revolver which such applicant may be permitted to carry under such permit other than a lawful use and that such person is a suitable person to receive such permit." Below is a partial listing of disqualifying convictions or events for an applicant and is not all-inclusive as the state law is constantly updated.

- **Application will be DENIED if you have ever been convicted of a crime deemed a FELONY at any time in any jurisdiction.**
- **Application will be DENIED if you have been convicted of any of the following crimes in the preceding 20 years:**
  1. Illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. 21a-279 (c)
  2. Criminally negligent homicide - 53a-58
  3. Assault in the third degree - 53a-61
  4. Assault of a victim 60 or older in the third degree - 53a-61a
  5. Threatening- 53a-62
  6. Reckless endangerment in the first degree - 53a-63
  7. Unlawful restraint in the second degree - 53a-96
  8. Riot in the first degree - 53a-175
  9. Riot in the second degree - 53a-176
  10. Inciting to riot - 53a-178
  11. Stalking in the second degree - 53a-181d
- **Other Standards for Permit Denial include, but may not be limited to the following:**
  1. The application will be denied if the applicant is the subject of any protective or restraining order involving the use or, or threatened use of force.
  3. The applicant will be denied if they were **CONVICTED of a MISDEMEANOR CRIME** in Connecticut for illegal possession of controlled or hallucinogenic substances, as specified under CGS 21a-279 on or after 10/1/2015.

4. The applicant will be denied if they were **CONVICTED of a MISDEMEANOR CRIME of DOMESTIC VIOLENCE**. This means an offense that (1) is a misdemeanor under federal or state law; and (2) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, or by a person with whom the victim shares a child in common, or by a person who is cohabiting with or who has cohabited with the victim or spouse, parent, or guardian, or by any person similarly situated to a spouse, parent or guardian of the victim.
5. The application will be denied if it is determined that:
  - You were discharged from custody within the preceding 20 years after having been found NOT GUILTY OF A CRIME BY REASON OF MENTAL DISEASE OR DEFECT 53a-13.
  - You were CONFINED TO A HOSPITAL for any psychiatric disability (17a-495) within the preceding 12 months by order of a judge of a probate court.
  - You are subject to a RESTRAINING ORDER or PROTECTIVE ORDER issued by a court in a case involving the use, attempted use or threatened use of physical force.
  - You are now subject to a Firearms Seizure Order issued pursuant to Public Act 99-212 Sec. 18, prohibiting possession of firearms.
  - You are an ILLEGAL ALIEN in the United States.
  - You are UNDER the AGE of 21 years.
  - You have renounced your United States citizenship.
  - You have been discharged from the Armed Forces under a dishonorable condition.
  - You are prohibited by Federal Law Section 922 (g) or (n) of Title 18 of the United States Code.

**Notice from Department of Emergency Services and Public Protection (State Police):**

In order to effectuate C.G.S. 29-28, the Department of Public Safety herein notifies the applicant that the Department of Public Safety (DPS) will be notified by the Department of Mental Health and Addiction Services (DMHAS) if the applicant has been confined in a hospital for psychiatric disabilities within the preceding twelve (12) months by order of probate court. The Department of Public Safety will use this information in order to fulfill its obligations under C.G.S. Section 29-28 to 29-38 inclusive.

For information on the State of CT pistol permit process after obtaining your temporary permit please visit the Connecticut Department of Public Safety web site and see PDFs below.

For further information or to check on the status of an application please contact the Ridgefield Police Detective Bureau 203-431-2794.

STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE



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 this application. These can be accessed on the Internet at [www.cga.ct.gov](http://www.cga.ct.gov) or through your local library.*

**Type of Permit Requested:**

Check Box:

- 60 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:   |
|---|--|---|
| <p>1. 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:</p> <ul style="list-style-type: none"> <li>▪ Firearms Safety &amp; Use Course Certificate;</li> <li>▪ \$70.00 fee, payable to the local authority; and</li> <li>▪ 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.).</li> </ul> <p>2. Fingerprints are required to process this application. Please contact your local law enforcement agency for further direction on the process for obtaining fingerprints.</p> <p>3. Upon approval, the local authority will issue a Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C), effective for 60 days.</p> <p>4. Within the 60 day period, go to a DESPP, Division of State Police, pistol permit location and submit the following:</p> <ul style="list-style-type: none"> <li>▪ The Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C) issued by the local authority;</li> <li>▪ A completed Application for State Permit to Carry Pistols and Revolvers (DPS-46-C);</li> <li>▪ \$70.00 fee, payable to <b>Treasurer, State of Connecticut</b>;</li> <li>▪ 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</li> <li>▪ Proof of valid state issued photo identification card.</li> </ul> <p>5. Upon approval, <i>your photograph will be taken at DESPP and you will be issued a state pistol permit.</i></p> | <p><b>**EMAIL DESPP FOR PACKET**</b><br/> <b><a href="mailto:SLFU.OOS@CT.GOV">SLFU.OOS@CT.GOV</a></b></p> <p><i>You must hold a valid permit or license to carry a pistol or revolver issued by a recognized United States jurisdiction.</i></p> | <p><b>**EMAIL DESPP FOR PACKET**</b><br/> <b><a href="mailto:SLFU.OOS@CT.GOV">SLFU.OOS@CT.GOV</a></b></p> <p><i>You must be 21 years of age to obtain a Pistol Eligibility Certificate. You must be 18 years of age to obtain a Long Gun Eligibility Certificate.</i></p> |

*For Department of Emergency Services and Public Protection (DESPP), Division of State Police, pistol permit locations, access [www.ct.gov/despp](http://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.*

**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION**  
**DIVISION OF STATE POLICE**

## Contact / Identifying Information:

|  |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
|--|--|--|---|--|---|--|--|--|---|-----------------------|--|------|--|----------------|--|
| Name of Applicant  |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
|  |  |  |   |  |   |  |  |  |   |                       |  | Last |  | Suffix         |  |
|  |  |  |   |  |   |  |  |  |   |                       |  |      |  | First          |  |
|  |  |  |   |  |   |  |  |  |   |                       |  |      |  | Middle Initial |  |
| Provide all other names by which you have been known (Maiden name, Aliases, Nicknames, etc.)<br>(Attach additional sheet(s), if necessary)   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| Date of Birth<br>____/____/____, Month/Day/Year  |  |  | Sex<br><input type="checkbox"/> F <input type="checkbox"/> M<br><input type="checkbox"/> Unknown/Non-binary |  | Height<br><input type="checkbox"/> Ft. <input type="checkbox"/> In. |  | Weight<br><input type="checkbox"/> ____ Lbs. |  | Eye Color<br><input type="checkbox"/> Brown <input type="checkbox"/> Blue <input type="checkbox"/> Black<br><input type="checkbox"/> Green <input type="checkbox"/> Gray <input type="checkbox"/> Hazel |                       |  |      |  |                |  |
| Race<br><input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander<br><input type="checkbox"/> Black <input type="checkbox"/> Unknown/Other            |  |  |   |  |   |  |  | Hair Color<br><input type="checkbox"/> Brown <input type="checkbox"/> Black <input type="checkbox"/> Blonde <input type="checkbox"/> Red<br><input type="checkbox"/> Gray <input type="checkbox"/> White <input type="checkbox"/> Bald |   |                       |  |      |  |                |  |
| Place of Birth<br>____, _____<br>City/Town   |  |  |   |  |   |  |  | Social Security Number (Optional, but will help prevent misidentification)<br>____-____-____   |   |                       |  |      |  |                |  |
| Country of Citizenship<br>____, _____  |  |  |   |  |   |  |  | Alien Reg. Number (If applicable)<br>____, _____   |   |                       |  |      |  |                |  |
| Residential Address (List street address. Post office box numbers are not acceptable)<br>____, _____<br>Number/Stree   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| ____, _____<br>City/Town   |  |  |   |  |   |  |  | State  |   | ____-____<br>Zip Code |  |      |  |                |  |
| List Residential Addresses for the Last 7 Years (Attach additional sheet(s), if necessary)<br>*Any subsequent changes of address must be reported within 48 hours to the Special Licensing and Firearms Unit                       |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| 1. _____<br>2. _____   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| Mailing Address (If different from current residential address above)<br>____, _____<br>Number/Stree   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| ____, _____<br>City/Town   |  |  |   |  |   |  |  | State  |   | ____-____<br>Zip Code |  |      |  |                |  |
| Home Telephone Number<br>(____) ____-____  |  |  |   | Motor Vehicle Operator's License Number<br>____, _____ |   |  |  |  |   |                       |  |      |  |                |  |
| Area Code<br>Alternate Telephone Number<br>(____) ____-____  |  |  |   | ____, _____  |   |  |  |  |   |                       |  |      |  |                |  |
| Area Code  |  |  |   | State of Issue   |   |  |  |  |   |                       |  |      |  |                |  |
| <b>Employment History:</b>   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| List Employers and Occupation for the Last 7 Years (Provide employer's name, address and telephone number)<br>(Attach additional sheet(s), if necessary)   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| 1. _____ / Occupation: _____   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| 2. _____ / Occupation: _____   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| <b>Permit or Eligibility Certificate History:</b>  |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |
| Have you had a firearms permit, permit application or eligibility certificate of any kind from <u>ANY</u> jurisdiction in the United States denied, suspended or revoked? <input type="checkbox"/> NO <input type="checkbox"/> 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: _____   |  |  |   |  |   |  |  |  |   |                       |  |      |  |                |  |

STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE

**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  YES 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 pursuant to the law of the other jurisdiction. 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  YES 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?**  NO  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 less than Honorable Discharge?**  NO  YES

**STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE**

**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. Please make sure a copy of the certificate of completion for the additional training is also included.*

**Instructor:** (Check applicable box)

**National Rifle Association**  
 **Department of Energy and Environmental Protection (DEEP)**  
 **Other:** \_\_\_\_\_

**State Instructor's Name and ID Number:** \_\_\_\_\_

**Declaration:**

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 CGS § 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 \_\_\_\_\_

Signed \_\_\_\_\_

STATE OF \_\_\_\_\_

Print Name \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Name:  
 Notary Public  
 My Commission Expires:  
 Commissioner of Superior Court

**NOTICE: Appeal Process for Permits**

In the event that your application for pistol permit or eligibility certificate is denied or revoked, you may notify the Board of Firearm Permit Examiners, at 165 Capitol Ave, Suite 1070, Hartford, CT 06106. Telephone: (860) 256-2977 OR (860) 256-2947, in writing, within ninety (90) days, in order to begin your appeal process. At a hearing before the Board, you may request that your application be reconsidered or that your permit or eligibility certificate be reinstated.

**For Official Use Only:**

|   |  |   |
|---|--|---|
| <b>Application Received:</b><br><br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Month/Day/Year _____ | FBI Sent: <input type="checkbox"/> No <input type="checkbox"/> Yes<br>FBI Reply: <input type="checkbox"/> No <input type="checkbox"/> Yes<br>ICE Response: <input type="checkbox"/> No <input type="checkbox"/> Yes<br>DMHAS: <input type="checkbox"/> No <input type="checkbox"/> Yes<br>SPBI: <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Number : _____ | <b>Application Status:</b><br><br><input type="checkbox"/> Approved <input type="checkbox"/> Denied<br><br>(Signature and title of issuing authority) |
|---|--|---|

Requesting Entity: Ridgefield CT Police Department

## **FBI Privacy Act Statement**

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.

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 retained by the Entity.

## Noncriminal Justice Applicant's Privacy Rights

Requesting Entity: Ridgefield CT Police Department

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.**<sup>1</sup> These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- 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.<sup>2</sup>
- 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/identity-history-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.<sup>3</sup>

Updated 11/6/2019

If you need additional information or assistance, please contact:

| Connecticut Records:   | Out-of-State Records:  |
|--|--|
| <b>Department of Emergency Services and Public Protection State Police Bureau of Identification (SPBI)</b><br>1111 Country Club Road<br>Middletown, CT 06457<br>860-685-8480 | <b>Agency of Record</b><br><b>OR</b><br><b>FBI CJIS Division-Summary Request</b><br>1000 Custer Hollow Road<br>Clarksburg, West Virginia 26306 |

|           |      |
|-----------|------|
| SIGNATURE | DATE |
|-----------|------|

This document must be retained by the Entity.

<sup>1</sup> Written notification includes electronic notification, but excludes oral notification.

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

<sup>3</sup> 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).



**STATE OF CONNECTICUT**  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE  
Special Licensing & Firearms Unit



**\*\*VISA & MASTERCARD NOW ACCEPTED\*\***  
**ONLY AT MIDDLETOWN, CT LOCATION**

**NEW PISTOL PERMIT APPLICANTS MUST BRING THE FOLLOWING (5) ITEMS:**

1. A VALID 60-DAY TEMPORARY PERMIT (DPS-11-C)
2. PROOF OF LEGAL & LAWFUL PRESENCE IN THE UNITED STATES:
  - a. U.S. BIRTH CERTIFICATE; **OR**
  - b. U.S. PASSPORT; **OR**
  - c. DOCUMENTATION OF PERMANENT RESIDENCE FROM THE U.S. CITIZENSHIP & IMMIGRATION SERVICES; **OR** A NON-IMMIGRANT VISA WITH A HUNTING LICENSE EXCEPTION
3. CT DRIVERS LICENSE **OR** CT STATE ISSUED IDENTIFICATION CARD
4. PAYMENTS ACCEPTED: \$70.00 **EXACT** CASH, CHECK OR MONEY ORDER (**PAYABLE TO: "TREASURER, STATE OF CT"**) OR VISA & MASTERCARD (**CREDIT CARDS ACCEPTED AT MIDDLETOWN ONLY - 3% SERVICE CHARGE WHEN USING CREDIT CARDS**)
5. IN PERSON, FILL OUT A DPS-46-C CARD WHILE WAITING IN LINE. IF YOU HAVE QUESTIONS, ASK THE CLERK WHEN IT'S YOUR TURN AT THE WINDOW.

**YOU MUST APPEAR IN PERSON AT ONE OF THE FOLLOWING LOCATIONS:**

**APPOINTMENTS ARE NOT REQUIRED**

1. CT STATE POLICE HQ – 1111 COUNTRY CLUB ROAD, MIDDLETOWN, CT 06457
  - MONDAY – FRIDAY 8:30AM-4:00PM
2. TROOP E MONTVILLE – I-395 NORTH BETWEEN EXITS 6 & 9, MONTVILLE, CT 06382
  - Open ONLY on TUESDAY & SATURDAY: 8:00AM-4:15PM.
  - CLOSED FOR LUNCH 12-12:30PM
3. TROOP G BRIDGEPORT – 149 PROSPECT ST, BRIDGEPORT, CT 06604
  - TUESDAY, WEDNESDAY, FRIDAY, & SATURDAY: 8:00AM-4:15PM
  - THURSDAY: 10:30AM-6:45PM. CLOSED FOR LUNCH 2-2:30PM

General: (860) 685-8290 Special Licensing: (860) 685-8160 Fax: (860) 685-8496

1111 Country Club Road  
Middletown, CT 06457

[www.ct.gov/despp](http://www.ct.gov/despp)

*An Affirmative Action/Equal Opportunity Employer*



STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE  
Special Licensing and Firearms Unit



Instructions to Applicants

| Permits – New   | Pistol Permits – Renewal In-Person  | Pistol Permits – Renewal by Mail   |
|---|---|--|
| <p>1. A valid Temporary State Permit to Carry Pistols or Revolvers (DPS-11-C) must be presented in person at the Department of Emergency Services and Public Protection (DESPP) Headquarters located at 1111 Country Club Road, Middletown, Connecticut 06457-2389.</p> <p>2. Proof of legal and lawful presence in the United States is required. Acceptable forms of proof include a birth certificate, U.S. passport, or documentation of permanent residence from the U.S. Citizenship and Immigration Services.</p> <p>3. Payment of a \$70.00 fee is required, either by check or money order made payable to "Treasurer, State of Connecticut" or by exact cash payment.</p> <p>4. Your photograph and signature will be taken at DESPP.</p> | <p>1. All pistol permits may be renewed in person at DESPP Headquarters ninety (90) days prior to expiration or up to ninety (90) days after expiration. No permit can be renewed after the ninety (90) day grace period following the expiration date.</p> <p>2. Confirm the accuracy of the information on DPS-129-C. If corrections are required, draw a single line through any incorrect information and write in the correct information. Present the corrected form to DESPP.</p> <p>3. Bring a \$70.00 check or money order made payable to "Treasurer, State of Connecticut" or exact cash payment.</p> <p>4. Provide proof of being legally and lawfully in United States: U.S. Passport, Birth Certificate or Permanent Resident ID issued by I.C.E. or Naturalization Certificate;<br/><b>NOTE:</b> If Place of Birth states, "VERIFIED", you <u>do not</u> need to bring item # 4.</p> <p>5. Your photograph and signature will be taken at DESPP.</p> | <p>1. Out-of-state pistol permits may be renewed by mail. Effective 10/01/11, in-state renewals may also be completed by mail.</p> <p>2. Confirm the accuracy of the information on DPS-129-C. If corrections are required, draw a single line through any incorrect information and write in the correct information. Sign the corrected form in the presence of a notary prior to mailing.</p> <p>3. Using transparent tape, attach a 2" x 2" color passport photo, taken within the previous six (6) months, in the box provided.</p> <p>4. Include a \$70.00 check or money order made payable to "Treasurer, State of Connecticut." Do not send cash.</p> <p>4. Proof of legal and lawful presence in the United States is required. Acceptable forms of proof include a birth certificate, U.S. passport, or documentation of permanent residence from the U.S. Citizenship and Immigration Services. Do not send originals.</p> <p>5. Include a self-addressed, stamped #10 envelope.</p> |

**Renewals for Armed Security Officers (Blue Cards/Class 1) and Bail Enforcement Agents (Gold Cards/Class2)**

1. Follow the instructions above for Pistol Permits – Renewal In-Person.
2. An additional check or money order for \$62.00 is required, made payable to "Treasurer, State of Connecticut."
3. Include a self-addressed, stamped #10 envelope.
4. Armed Security Officers must submit a DPS-1030-C annually as proof of completion of the handgun qualification refresher course.

**Eligibility Certificates (New & Renewals)**

1. New applicants must complete the DPS-799-C and DPS-164-C, and sign it in the presence of an official when your **photo** is taken.
2. Submit an affidavit signed by an instructor certified by the State, the National Rifle Association, or the Department of Energy and Environmental Protection stating that the applicant successfully completed a safety or training course in the use of pistols or revolvers or long guns. Such statement shall specify that the instructor was so certified at the time that he taught the course, and shall include the full name of the applicant, and the date, location and duration of the course.
3. Submit fingerprints with two (2) separate checks or money orders to cover the federal processing fee of \$13.25 and the state fee of \$75.00, both made payable to "Treasurer, State of Connecticut", for the required criminal background checks.
4. Submit an additional check or money order for \$35.00 made payable to "Treasurer, State of Connecticut" for the processing of the Eligibility Certificate. If you are appearing in person, exact cash payments will be accepted.
5. When applicable, criminal and/or mental health records must be submitted per Connecticut General Statutes Section 29-36g.
6. Renewal applicants must submit a DPS-129-C-2, with \$35.00 fee made payable to "Treasurer, State of Connecticut" and documentation of legal and lawful presence in the United States (see # 2 under "Pistol Permits New" for acceptable documents), if previously not verified. **Do not mail cash.**
7. Include a self-addressed, stamped #10 envelope.

**Ammunition Certificates (New & Renewals):**

1. **New applicants must complete DESPP-417-C, and sign it in the presence of an official when your photo is taken.**
2. Submit check or money order for \$35.00 made payable to "Treasurer, State of Connecticut" or exact cash payment, for the processing of the Ammunition Certificate.
3. When applicable, criminal and/or mental health records must be submitted per Connecticut General Statutes Section 29-36g
4. Renewal applicants must submit a DPS-129-C-2 with \$35.00 fee made payable to "Treasurer State of Connecticut." **Do not mail cash.**

**SEE IMPORTANT NOTICES – REVERSE SIDE**

**STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE**

**NOTICE**

Pursuant to C.G.S. §§ 29-28, 29-32, 29-36f 29-36l, and 18 U.S.C. § 922, *applications covered by these instructions will not be issued or be renewed, if:*

1. **You have a *FELONY CONVICTION* in any jurisdiction.**
2. **You have a *MISDEMEANOR CONVICTION* in Connecticut for one of the following crimes: After 10/01/1994**
  - a. Illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. § 21a-279
  - b. Criminally negligent homicide as specified under C.G.S. § 53a-58
  - c. Assault in the third degree as specified under C.G.S. § 53a-61
  - d. Assault of an elderly, blind, disabled or pregnant person or a person with intellectual disability in the third degree as specified under C.G.S. § 53a-61a
  - e. Threatening in the second degree as specified under C.G.S. § 53a-62
  - f. Reckless endangerment in the first degree as specified under C.G.S. § 53a-63
  - g. Unlawful restraint in the second degree as specified under C.G.S. § 53a-96
  - h. Riot in the first degree as specified under C.G.S. § 53a-175
  - i. Riot in the second degree as specified under C.G.S. § 53a-176
  - j. Inciting to riot as specified under C.G.S. § 53a-178
  - k. Stalking in the second degree as specified under C.G.S. § 53a-181d
3. **You are an unlawful user of or addicted to any controlled substance (as defined in the Controlled Substances Act (21 U.S.C. 801, et. seq.).**
4. **You were *CONVICTED* of a *MISDEMEANOR CRIME of DOMESTIC VIOLENCE*.**  
This means an offense that (1) is a misdemeanor under federal or state law; and (2) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, or by a person with whom the victim shares a child in common, or by a person who is cohabiting with or who has cohabited with the victim or spouse, parent, or guardian, or by any person similarly situated to a spouse, parent or guardian of the victim.
5. **You were discharged from custody within the preceding 20 years after having been found *NOT GUILTY OF A CRIME BY REASON OF MENTAL DISEASE OR DEFECT* pursuant to C.G.S. § 53a-13.**
6. **You were *CONFINED TO A HOSPITAL* for persons with psychiatric disabilities (C.G.S. § 17a-495) within the preceding sixty (60) months by order of a Probate Court.**
7. **You have been voluntarily admitted to a hospital for persons with psychiatric disabilities, within the preceding six (6) months for reasons other than solely for alcohol or drug dependence.**
8. **You are subject to a *RESTRAINING ORDER* or *PROTECTIVE ORDER* issued by a court after notice and an opportunity to be heard has been provided to you in a case involving the use, attempted use or threatened use of physical force against another person.**
9. **You are the subject of a court issued risk warrant to seize firearms pursuant to C.G.S. § 29-38c(d).**
10. **You are an *ILLEGAL ALIEN* in the United States.**
11. **You are *UNDER the AGE* of 21 years.**
12. **You have renounced your United States citizenship.**
13. **You have been discharged from the Armed Forces under a dishonorable condition.**
14. **You are prohibited by federal law, under 18 U.S.C. 922 (g) or (n).**

Please mail in your renewal or direct any questions regarding your status to DESPP Headquarters, Special Licensing and Firearms Unit, located at 1111 Country Club Road, Middletown, Connecticut 06457-2389 or by telephone at (860) 685-8290. Hours of operation are Monday through Friday 8:30 am – 4:15 pm. **Please note all locations will be closed on State and Federal holidays. Troop location may be closed during inclement weather. No appointments necessary.**

**Troop E** – Montville I-395 N (between exits 6 & 9) Montville, CT 06382, telephone 860-848-6539 –  
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.

**Troop G** - Bridgeport, 149 Prospect Street, Bridgeport, Connecticut, 06604; telephone (203) 696-2532  
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.

Current schedules, hours and directions can be found at [www.ct.gov/despp](http://www.ct.gov/despp) - click on Special Licensing and Firearms Unit link.

**The Department of Emergency Services and Public Protection (DESPP) herein notifies the applicant that DESPP will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined in a hospital for persons with 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 persons with psychiatric disabilities within the preceding six (6) months for reasons other than solely for alcohol or drug dependence. DESPP will use this information in order to fulfill its statutory obligations under Connecticut General Statutes Sections 29-28, 29-36f.**