Instructions to Applicants

<table>
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<th>Pistol Permits – New</th>
<th>Pistol Permits – Renewal by Mail</th>
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<td>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 or one of our satellite offices at Troop G or Troop E (by appointment only). For NEW Out of State Pistol Permit Requests, please contact <a href="mailto:SLFU.OOS@ct.gov">SLFU.OOS@ct.gov</a> for a packet to be mailed to you.</td>
<td>1. Out-of-state, and in state pistol permit renewals must be completed by mail.</td>
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<td>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.</td>
<td>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.</td>
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<td>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.</td>
<td>3. Using transparent tape, attach a 2” x 2” color passport photo, taken within the previous six (6) months, in the box provided.</td>
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<td>4. Your photograph and signature will be taken at DESPP.</td>
<td>4. Include a $70.00 check or money order payable to “Treasurer, State of Connecticut.” Do not send cash.</td>
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Renewals for Armed Security Officers (Blue Cards/Class 1) and Bail Enforcement Agents (Gold Cards/Class 2)

1. Follow the instructions above for Pistol Permits – Renewal by mail
2. An additional check or money order for $62.00 is required, made payable to “Treasurer, State of Connecticut.”
3. 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, please contact SLFU for a packet to be mailed to you. This can be done by sending an email to SLFU.OOS@ct.gov and including what type of Eligibility Certificate you are requesting (Pistol or Long Gun), and including your name and mailing address within the body of the email.
2. Renewal applicants must submit a DPS-129-C-2, with a $35.00 fee made payable to “Treasurer, State of Connecticut”. Do not mail cash. Documentation of legal and lawful presence in the United States must also be included (see # 2 under “Pistol Permits New” for acceptable documents). A color passport photo must also be affixed to the DPS-129-C-2 form, and the form must be notarized.

Ammunition Certificates (New & Renewals):

1. New applicants must complete DESPP-417-C, and sign it in the presence of an official.
2. Include a 2” x 2” color passport photo, taken within the previous six (6) months.
3. Submit check or money order for $35.00 made payable to “Treasurer, State of Connecticut,” for the processing of the Ammunition Certificate. Do not mail cash.
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. A color passport photo must also be affixed to the DPS-129-C-2 form, and the form must be notarized.

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 29-36i, 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 in the preceding 20 years:
   a. Criminally negligent homicide as specified under C.G.S. § 53a-58
   b. Assault in the third degree as specified under C.G.S. § 53a-61
   c. 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
   d. Threatening in the second degree as specified under C.G.S. § 53a-62
   e. Reckless endangerment in the first degree as specified under C.G.S. § 53a-63
   f. Unlawful restraint in the second degree as specified under C.G.S. § 53a-96
   g. Riot in the first degree as specified under C.G.S. § 53a-175
   h. Riot in the second degree as specified under C.G.S. § 53a-176
   i. Inciting to riot as specified under C.G.S. § 53a-178
   j. Stalking in the second degree as specified under C.G.S. § 53a-181d

3. You have a MISDEMEANOR CONVICTION in Connecticut for illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. § 21a-279 on or after 10/1/2015

4. 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.).

5. 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.

6. 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.

7. 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.

8. 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.

9. 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.

10. You are the subject of a court issued risk warrant to seize firearms pursuant to C.G.S. § 29-38c(d).

11. You are an ILLEGAL ALIEN in the United States.

12. You are UNDER the AGE of 21 years.

13. You have renounced your United States citizenship.

14. You have been discharged from the Armed Forces under a dishonorable condition.

15. 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 locations may be closed during inclement weather.

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.—BY APPOINTMENT ONLY

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.—BY APPOINTMENT ONLY

Current schedules, hours and directions can be found at 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.