

**STATE OF MISSOURI
 COUNTY OF LINN
 CONCEALED CARRY PERMIT APPLICATION
 NEW PERMIT REQUEST**

APPROVED

DENIED

NAME (LAST, FIRST, MIDDLE):			DAYTIME PHONE (INCLUDE AREA CODE):		
DATE OF BIRTH:	PLACE OF BIRTH: USA OTHER EXPLAIN:		GENDER: MALE FEMALE		
RESIDENCE ADDRESS:					
CITY:			STATE:	ZIP CODE:	
COUNTRY OF CITIZENSHIP:			ALIEN OR ADMISSION NUMBER:		

AFFIRMATION

I hereby affirm the following:

- *I have assumed residency in Missouri; or I am a member of the armed forces stationed in Missouri; or I am a spouse of such a member of the armed forces;*
- *I am a citizen or permanent resident of the United States;*
- *I am at least nineteen years of age; or I am eighteen years of age or older and a member of the United States Armed Forces or honorably discharged from the United States Armed Forces;*
- *I have not pled guilty to or been convicted of a crime punishable by imprisonment for a term exceeding one year under the laws of any state or of the United States other than a crime classified as a misdemeanor under the laws of any state and punishable by a term of imprisonment of two years or less that does not involve an explosive weapon, firearm, firearm silencer or gas gun;*
- *I have not been convicted of, pled guilty to, or entered a plea of nolo contendere to one or more misdemeanor offenses involving crimes of violence within a five-year period immediately preceding application for a permit and I have not been convicted of two or more misdemeanor offenses involving driving while under the influence of intoxicating liquor or drugs or the possession or abuse of a controlled substance with-in a five-year period immediately preceding application for a carry permit;*
- *I am not a fugitive from justice or currently charged in an information or indictment with the commission of a crime punishable by imprisonment for a term exceeding one year under the laws of any state or of the United States other than a crime classified as a misdemeanor under the laws of any state and punishable by a term of imprisonment of two years or less that does not involve an explosive weapon, firearm, firearm silencer or gas gun;*
- *I have not been discharged under dishonorable conditions from the United States Armed Forces;*
- *I am not adjudged mentally incompetent at the time of this application or for five years prior to application, or have not been committed to a mental health facility, as defined in section 632.005 or a similar institution located in another state or that my release or discharge from a facility in this state pursuant to chapter 632, or a similar discharge from a facility in another state, occurred more than five years ago without subsequent recommitment;*
- *I affirm that I have received firearms safety training that meets the standards of applicant firearms safety training defined in section 1 or 2 of section 571.111, RSMo;*
- *To the best of my knowledge and belief, I am not a respondent of a valid full order of protection that is still in effect.*

I hereby sign under oath and under the penalties of perjury that I am in compliance with each of the requirements specified in subsection 2 of RSMo section 571.101 and acknowledge that false statements made by me will result in prosecution for perjury pursuant to the laws of the state of Missouri.

X _____	_____	5 Year Permit
APPLICANT SIGNATURE:	DATE (mm/dd/yyyy):	10 Year Permit
X _____	_____	25 Year Permit
SHERIFF (SHERIFF'S DESIGNEE) SIGNATURE:	DATE (mm/dd/yyyy):	Lifetime Permit

PRINTED NAME (last, first, middle)		