



The Commonwealth of Massachusetts
Criminal History Systems Board

Firearms Record Bureau
200 Arlington Street, Suite 2200
Chelsea, MA 02150

FTN: _____

LIC #: _____

Application

FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR
LICENSE TO CARRY FIREARMS OR LICENSE TO POSSESS A MACHINE GUN
(MGL C.140, s.129B AND s.131)

Please Check One

Form with checkboxes for New Applicant, Renewal - Most Recent License to Carry/FID Number, and Issued from Which City/Town? MA Expiration Date:

*NOTE: If application is for first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached to this application.

Please Check the Type of License for Which You are Applying

(Please Check Only One)

Form with checkboxes for various license types: Firearms Identification Card - Restricted, Firearms Identification Card, Class B License to Carry, Class A License to Carry, License to Possess a Machine Gun, and Check if a Class 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

Gun Club Address (If Applicable) City State Zip Code Telephone Number

Date of Birth Place of Birth

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

Height Weight Build Complexion Hair Color Eye Color

Occupation Social Security Number (Optional) Drivers License Number

Employed By Business Address

City/Town State Zip Telephone Number

Please Answer the Following Questions Completely and Accurately

1. Are you a citizen of the United States? _____
If naturalized give date, place and naturalization number

	Date	Place	Naturalization No.

2. Have you ever used or been known by another name? _____
If yes, provide name and explain: _____

3. What is your age? *You must be 21 years of age to apply for a License To Carry Firearms, 18 years of age to apply for a Firearms Identification Card, 15 years of age but less than 18 years of age with submission of a certificate of parent or guardian granting permission to apply for a Firearms Identification Card. _____

4. Have you ever been convicted of a felony? _____

5. Have you ever been convicted of the unlawful use, possession, or sale of narcotic or harmful drugs as defined in M.G.L. c. 94C sec. 1? _____

6. Have you ever been convicted of a crime punishable by incarceration by more than one (1) year? _____

7. In any state or federal jurisdiction have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child for the commission of (a) a felony; (b) a misdemeanor punishable by imprisonment for more than 2 years; (c) a violent crime as defined in MGL C140.s.121; (d) a violation of any law regulating the use, possession, ownership, sale, transfer, rental, receipt or transportation of weapons or ammunition for which a term of imprisonment may be imposed; or (e) a violation of any law regulating the use, possession or sale of controlled substances as defined in section 1 of MGL 94C? _____

8. Have you ever been confined to any hospital or institution for mental illness? _____

9. Are you or have you ever been under treatment for or confinement for drug addiction or habitual drunkenness? _____

10. Have you ever appeared in any court as a defendant for any criminal offense (excluding non-criminal traffic offenses)? _____

11. Are you now under any charge(s) for any offense(s) against the law? _____

12. Are you now or have you ever been the subject of a M.G.L. C209A restraining order or involved in a domestic violence charge? _____

13. Has any License to Carry Firearms, Permit to Possess Firearms, or Firearms Identification Card issued under the laws of any state or territory ever been suspended, revoked, or denied? _____

14. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction? _____

If You Answered "YES" to any of the Questions 4-14, Give Details Which Must Include Dates, Circumstances and Location

Other than Massachusetts, in what state, territory or jurisdiction have you resided? _____

Have you ever held a License to Carry in any other state, territory or jurisdiction? _____

If "YES", when, where and license number? _____

List the Name and Addresses of Two References

1. _____

_____	_____	_____	_____
Last Name	First Name		
_____	_____	_____	_____
Address	City/Town	State	Zip

2. _____

_____	_____	_____	_____
Last Name	First Name		
_____	_____	_____	_____
Address	City/Town	State	Zip

Reason(s) for requesting the issuance of a card or license: _____

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 (MGL c.140, §§ 129B(8) and 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.

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

Signature of Applicant: _____