

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 POSSES A MACHINE GUN (MGL C.140, s.129B AND s.131)

Please Check One

_	New App	olicant									
_	Renewal	l - Most Rece	nt License to Ca	rry/FID Number:							
	Issued fro	om Which Cit	ty/Town?		MA	Exp	oiration Date:				
				entification card or lice ttached to this applica	ense to carry firearms, a cation.	ору с	of the Firearms	Safety Certificate or			
		Pi	ease Check		ense for Which You eck Only One)	ı are	Applying				
_	Firearms	Identification	Card - Restricte	ed (mace and pepper	spray)						
_	Firearms	Identification	Card								
_	Class B I	License to Ca	arry - Non-Large	Capacity							
_	Class A License to Carry - Large Capacity										
_	License t	to Possess a	Machine Gun								
_	_ Check if a Class A Gun Club License *NOTE: Only the Colonel of the State Police can issue a club license.										
		E -	voont for Sic	anatura Brint or	Type all Requested	d Inf	ormation				
		E .	xcept for Sig	gnature, Print or	Type all Requested	u IIII	Offication				
Last	Name			First Name	Mic	Middle N		Suffix			
Res	idential Ad	ddress		City	Sta	ate	Zip Code	Telephone Number			
Gur	Club Add	dress (If Appli	cahla)	City	Sta	ato.	Zip Code	Telephone Number			
Guii	Club Add	лезэ (п дррп	cable)	City	Ote	ale	Zip Code	relephone Number			
Date	e of Birth	Place	of Birth								
Mother's First Name Mother's M		Mother's Ma	iden Name	Father's First Name	Father's Last Name						
Height Weight		Weight	Build Complexion		Hair Color		Eye Color				
Occ	upation				Social Security Nu	ımber	· (Optional) Dr	ivers License Number			
Осс	upation				Social Security Nu	ımber	(Optional) Dr	ivers License Number			
						ımber	(Optional) Dr	ivers License Number			
	upation bloyed By				Social Security Nu Business Address	ımber	(Optional) Dr	ivers License Number			
						ımber	(Optional) Dr	ivers License Number			

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Please Answer the Following Questions Completely and Accurately

1.										
	If naturalized give date, place and naturalization number	Date	Place	Naturalization No.						
2.	Have you ever used or been known by anoth	ve 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 Firearms Identification Card, 15 years of age guardian granting permission to apply for a Fi	but less than 1	8 years of age with submiss							
4.	Have you ever been convicted of a felony?									
5.	Have you ever been convicted of the unlawfu M.G.L. c. 94C sec. 1?	l use, possessi	on, or sale of narcotic or ha	rmful drugs as defined in						
6.	Have you ever been convicted of a crime pun	ishable by inca	rceration 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 fo	r mental illness?							
9.	Are you or have you ever been under treatme	ent for or confin	ement for drug addiction or	habitual drunkenness?						
10.	Have you ever appeared in any court as a de	fendant for any	criminal offense (excluding	non-criminal traffic offenses)?						
11.	Are you now under any charge(s) for any offe	nse(s) against	the law?							
12.	Are you now or have you ever been the subjectarge?	ect of a M.G.L.	C209A restraining order or i	nvolved in a domestic violence						
13.	Has any License to Carry Firearms, Permit to of any state or territory ever been suspended			ion Card issued under the laws						
14.	Are you currently the subject of any outstandi	ng arrest warra	ant in any state or federal ju	risdiction?						

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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 Last Name First Name Address City/Town State Zip First Name Last Name Address City/Town 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, s.131). 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 and may be used in a criminal proceeding pursuant to Massachusetts General Law Chapter 140, Section 129 and 131. Signed under the penalties of perjury this Signature of Applicant:

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

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