



Bridgeport Police Department

INSTRUCTIONS TO PISTOL PERMIT APPLICANTS EFFECTIVE July 20, 2021, to have your temporary state pistol permit processed, you must have the following:

- **Valid** State of Connecticut Driver's License or Identification Card with your current Bridgeport address. If current address does not match your application, it will **not** be accepted without the sticker from DMV with your current address.
- The **original** or **certified copy** (with the seal) of your **birth certificate** or valid **United States** passport.
 - If you are **NOT** a United States citizen, you must provide your **alien registration card (green card)**.
 - If you were **NOT** born in the United States but are now a United States citizen, you must provide your **naturalization certificate**.
If you were in the military, you must provide your **discharge papers (DD-214)**. The page where it states the conditions of which you were discharged.
- An **original** NRA course certificate. EFFECTIVE JULY 1ST, 2024 - THE COURSE CERTIFICATE DATE MUST BE WITHIN 2 YEARS OF THE DATE OF THE APPLICATION SUBMISSION TO BE ACCEPTED BY STATUTE.
- **Two (2) passport sized photos**. (No paper photos will be accepted. You can have them taken at CVS or Walgreens.)
- The Department of Emergency Services and Public Protection (DESPP) Pistol Permit Application Form DPS-799-C **filled out and notarized**.
- Three (3) Proofs of address. (See attached list for acceptable documents.)
- The City of Bridgeport will still require a payment of \$70 the day you submit your pistol permit application in the form of a money order, or a bank check made payable to: CITY OF BRIDGEPORT.
- Credit card is needed to apply and receive ATN tracking number for State Barcode. Fee is approximately \$90.00 (Barcode can only be obtained at fingerprinting appointment after application has been submitted).

FINGERPRINT UPDATE: As of May 1st 2024, You will be required to obtain a ATN tracking ID at your fingerprint appointment, at the time of appointment, upon submitting your completed application Bridgeport Police Department will give you the code needed for fingerprinting. If your application is not complete and any documents above are missing you will have to reschedule your appointment. Payment for the State of Connecticut is \$75, and the FBI is \$13.25 and will be processed through this website. (Please bring a credit card to your appointment to complete the enrollment process. The City of Bridgeport will still require a payment of \$70 the day you submit your pistol permit application in the form of a **money order**, or a **bank check** made payable to: CITY OF BRIDGEPORT. **NO** personal checks, cash, or credit cards are accepted. **Once the above package and paperwork has been gathered, you will make an appointment for your fingerprints by going to the following website: <https://veoci.com/veoci/p/form/aajkhk44bpme>**. Paperwork will not be accepted without your fingerprints. Fingerprints for pistol permit can only be done at the Bridgeport Police Department. Pistol Permit Application can only be submitted at the time of fingerprint appointment.

Scan Below For
Bridgeport Police
Department Appointment



Bridgeport Police Department Temporary State Pistol Permit Application and Instructions for Bridgeport Residents



Dear Applicant:

You **MUST** be a bona fide **permanent resident of the City of Bridgeport** to be eligible to apply. Non-resident property/business owners are not eligible and must apply through the State Police Firearms Unit for a Non-Resident permit. You must be 21 years old at the time you submit your application.

STEP # 1: You **MUST FIRST** complete a Pistol Safety Course that has been approved by the State of Connecticut Special Licensing and Firearms Unit that includes "Live Fire" and receive a certificate. Such as a NRA, USCCA, or Other Courses that provide a certificate along with a letter from the State Firearms Unit indicating that their program has been approved.

Click on link to view "[Invalid NRA Certificate](#)" example. This certificate has not been accepted since May of 2016 and is no longer recognized by the NRA. **EFFECTIVE JULY 1ST, 2024 - THE COURSE CERTIFICATE DATE MUST BE WITHIN 2 YEARS OF THE DATE OF THE APPLICATION SUBMISSION TO BE ACCEPTED BY STATUTE.**

STEP # 2: Complete a State of Connecticut 60 Day Temporary Pistol Permit application (form DPS-799-C Rev. 08/04/2022) and have it **Notarized**. Answer all questions. Incomplete applications can be subject to a denial or arrest for False Statement as indicated. on page 4 of the application.

Bridgeport Police Department Temporary State Pistol Permit Application and Instructions for Bridgeport Residents



STEP# 3: Schedule your fingerprint appointment online.
ALL FINGERPRINT APPOINTMENTS MUST BE MADE
ONLINE **NO WALK-INS WILL BE ACCEPTED.**

1. To make a fingerprint appointment you can:
- A)** Go to the Bridgeport Police website under the Fingerprinting link and click on "Fingerprinting Online Scheduling" and choose a date and time slot. **OR**
 - B)** Go to <https://www.bridgeportct.gov/government/departments/police-department/fingerprinting-services>

Fingerprinting Hours :

Monday through Friday 9:00am -3:00 pm (By appointment only)

Location: 300 Congress St Bridgeport CT 06604- Police Headquarters

Items you **MUST** bring to the **fingerprinting appointment**. Failure to have any of the items listed below will make your application incomplete and you will **NOT** be fingerprinted. Make sure you have each Item Number.

Step# 4: At the fingerprinting appointment the applicant will need a completed notarized application and all documents listed below;

1.FULLY COMPLETED APPLICATION:

On a State of Connecticut Pistol Permit Application Form DPS-799-C (revised 08/04/22). **Outdated forms will not be accepted.** Check off the box for "60 Day Temporary State Pistol Permit" on page 1. **All Questions must be answered.**

Bridgeport Police Department Temporary State Pistol Permit Application and Instructions for Bridgeport Residents



2. NOTARIZED APPLICATION: Have the application notarized prior to your arrival. **We do not notarize applications.**

3. BASIC PISTOL SAFETY COURSE CERTIFICATE:

An original Certificate of Completion for a course approved by the Commissioner of Public Safety in the safety and use of pistols and revolvers.

* *NRA certificate. Currently the NRA certificate is valid for 5 years. Effective July 1st, 2024- The Course Certificate date must be within 2 years of the date of the application submission to be accepted by statute. ***The NRA's "Home Firearms Safety Course" and "First Steps Pistol Orientation Program" are NOT accepted.

5. PHOTO: Two (2) passport size color photo of yourself to attach to application.

6. PAYMENT:

Bridgeport Police Pistol Permit Fee = \$70

Payment Methods: Certified Bank Check or MONEY

ORDER- payable to "City of Bridgeport".

Credit card is needed to apply and receive ATN tracking number for State Barcode. Fee is approximately \$90.00 (Barcode can only be obtained at fingerprinting appointment after application has been submitted.

7. VALID PHOTO IDENTIFICATION: Proof of your identity and your Bridgeport Residency.

State of Connecticut Driver License with Bridgeport address

Bridgeport Police Department Temporary State Pistol Permit Application and Instructions for Bridgeport Residents



OR

**State of CT Photo Identification Card with Bridgeport address
Out of State Driver Licenses will NOT be accepted.**

8. PROOF of U.S. CITIZENSHIP or Legally in the U.S.

You Must Bring; One {1} of the Following:

Your United States Birth Certificate;

OR

Your Valid United States Passport;

OR

Your Valid United States Permanent Resident Card

B) Non-Immigrant Alien in the United States legally:

1 - Visa or 1-94 form (valid)

2 - Exceptions under 18 USC 922(y)(2)

**- Admitted to U.S. for hunting or has a valid
hunting license.**

**- Or received a waiver for the U.S. Attorney
General.**

9.) Three (3) proofs of address. (See attached list for acceptable documents.

Step #5: Bring the completed application and documents to your scheduled fingerprinting appointment. Applications will only be accepted by appointment at 300 Congress St Bridgeport (Pistol Permit Window) upon submitting your completed application the candidate will be given the code to complete the fingerprinting barcode. Please bring a credit card to complete the pre-enrollment process. As of May

Bridgeport Police Department Temporary State Pistol Permit Application and Instructions for Bridgeport Residents



1st, 2024 fingerprints will only be completed after submitting the pistol permit application.

A) The Temporary Pistol Permit is valid for only 60 days from the date it is signed. You must then convert the Temporary Pistol Permit to a State Permit with the Connecticut State Police and book an appointment on their website.

B) **WARNING:** You must list all applicable arrests and convictions from any State or Jurisdiction in the Criminal History Section on page 3 of the application. Failing to provide accurate and complete information may result in the violation of Connecticut General Statute 53a-157b - False Statement.

This may lead to an arrest warrant for the omission of disqualifying arrests and convictions.

C) A Conviction may consist of a variety of different dispositions such as: being found guilty after a trial; pleading guilty in Court; receiving a Suspended Jail sentence; Paying a Fine after pleading guilty. Receiving a Conditional Discharge. Just because you didn't go to jail does not mean you were not convicted of a crime. If not sure, list them anyway, it is your responsibility to submit a complete application.

D) If you are checking your criminal record on the Connecticut Judicial website; be aware that it only contains conviction information that goes back 10 years from the current date. If you are not sure of your conviction status, you can go to www.ct.gov/dps and download the "CRIMINAL HISTORY RECORD REQUEST FORM" and follow the instructions to get your criminal record from the State of CT by name and date of birth prior to filling out the pistol permit application.

Any Questions contact:

[Bridgeport Police Department- Pistol Permits](#)
[203-587-5263](tel:203-587-5263)



City of Bridgeport
Acceptable Proof of Bridgeport Residency

Residency Documents

You must provide 3 different forms of acceptable residency documents when applying. When using a mailing address that is a post office (PO) box or general delivery, you must provide an actual place of residence on your application (A Bridgeport License or ID will be required as part of the application process, so it will not be considered as a proof of address.) The address on the residency documents must match the residence address on your application.

All documents with *** require to be dated within 60 days and only one of each is acceptable.

- Rental or lease agreement with the signatures of the owner/landlord and the tenant/resident.
- Deed or title to residential real property.
- Mortgage bill. ***
- Home utility bill (including cellular phone). ***
- School document.
- Medical document. ***
- Employment document. (pay stub) ***
- Insurance documents, including medical, dental, vision, life, home, rental, and vehicle.
- Internal Revenue Service or CT tax return from current year.
- Connecticut title or registration for a vehicle or vessel.
- Change of Address Confirmation by the United States (U.S.) Postal Service (Form CNL 107).
- Documents issued by a government within the U.S. or the U.S. government institution (military ID for example or federal work ID).
- Property tax bill or statement.
- Record of a financial institution. ***
- Court document that lists the applicant as a resident of Connecticut.

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 firearms. These can be accessed on the Internet at 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"> ▪ Firearms Safety & Use Course Certificate; ▪ \$70.00 fee, payable to the local authority; and ▪ 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.). <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"> ▪ The Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C) issued by the local authority; ▪ A completed Application for State Permit to Carry Pistols and Revolvers (DPS-46-C); ▪ \$70.00 fee, payable to Treasurer, State of Connecticut; ▪ 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 ▪ Proof of valid state issued photo identification card. <p>5. Upon approval, your photograph will be taken at DESPP and you will be issued a state pistol permit.</p>	<p>**CALL DESPP FOR PACKET**</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>**CALL DESPP FOR PACKET**</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 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

<input type="text"/>	<input type="text"/>
Last	Suffix
<input type="text"/>	<input type="text"/>
First	Middle Initial

Provide all other names by which you have been known (Maiden name, Aliases, Nicknames, etc.)
(Attach additional sheet(s), if necessary)

Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> Month/Day/Year	Sex <input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> Unknown/Non-binary	Height <input type="text"/> Ft. <input type="text"/> In.	Weight <input type="text"/> Lbs.	Eye Color <input type="checkbox"/> Brown <input type="checkbox"/> Blue <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Gray <input type="checkbox"/> Hazel
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Race <input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Unknown/Other	Hair Color <input type="checkbox"/> Brown <input type="checkbox"/> Black <input type="checkbox"/> Blonde <input type="checkbox"/> Red <input type="checkbox"/> Gray <input type="checkbox"/> White <input type="checkbox"/> Bald
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Place of Birth <input type="text"/> City/Town	<input type="text"/> State	Social Security Number (Optional, but will help prevent misidentification) <input type="text"/> - <input type="text"/> - <input type="text"/>
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Country of Citizenship <input type="text"/>	Alien Reg. Number (If applicable) <input type="text"/>
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Residential Address (List street address. Post office box numbers are not acceptable)

Number/Street

-

City/Town
 State
Zip Code

List Residential Addresses for the Last 7 Years (Attach additional sheet(s), if necessary)
 *Any subsequent changes of address must be reported within 48 hours to the Special Licensing and Firearms Unit

1. _____

2. _____

Mailing Address (If different from current residential address above)

Number/Street

-

City/Town
 State
Zip Code

Home Telephone Number (<input type="text"/> <input type="text"/> <input type="text"/>) <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Area Code	Motor Vehicle Operator's License Number <input type="text"/>	<input type="text"/> State of Issue
Alternate Telephone Number (<input type="text"/> <input type="text"/> <input type="text"/>) <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Area Code	Email Address _____	

Employment History:

List Employers for the Last 7 Years (Provide employer's name, address and telephone number)
(Attach additional sheet(s), if necessary)

1. _____

2. _____

Permit or Eligibility Certificate History:

Have you had a firearms permit, permit application or eligibility certificate of any kind from ANY jurisdiction in the United States denied, suspended or revoked? NO 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 nolle, 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.*

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 _____

COUNTY OF _____ Print Name _____

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 20 Trinity St., 5th Floor, 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:

<p>Application Received:</p> <p>□□/□□/□□□□ Month/Day/Year</p>	<p>FBI Sent: <input type="checkbox"/>No <input type="checkbox"/>Yes</p> <p>FBI Reply: <input type="checkbox"/>No <input type="checkbox"/>Yes</p> <p>ICE Response: <input type="checkbox"/>No <input type="checkbox"/>Yes</p> <p>DMHAS: <input type="checkbox"/>No <input type="checkbox"/>Yes</p> <p>SPBI: <input type="checkbox"/>No <input type="checkbox"/>Yes</p> <p>Number: _____</p>	<p>Application Status:</p> <p><input type="checkbox"/>Approved <input type="checkbox"/>Denied</p> <p>_____ (Signature and title of issuing authority)</p>
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**STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE
Special Licensing and Firearms Unit**



Instructions to Applicants

Pistol Permits – New	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 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 SLFU.OOS@ct.gov for a packet to be mailed to you.</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. Out-of-state, and in state pistol permit renewals must 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 payable to "Treasurer, State of Connecticut." Do not send cash.</p> <p>5. 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. <u>Do not send originals.</u></p>

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

- Follow the instructions above for Pistol Permits – Renewal by mail
- An additional check or money order for \$62.00 is required, made payable to "Treasurer, State of Connecticut."
- Armed Security Officers must submit a DPS-1030-C annually as proof of completion of the handgun qualification refresher course.

Eligibility Certificates (New & Renewals)

- 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.
- 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):

- New applicants must complete DESPP-417-C, and sign it in the presence of an official.
- Include a 2" x 2" color passport photo, taken within the previous six (6) months.
- 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.**
- 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.



300 Congress St Bridgeport CT, 06604
Phone: 203-581-5263 Fax: 203-394-6967

POLICE
DEPARTMENT

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION FOR PISTOL PERMIT FILE CHECKS

I, _____, do hereby authorize a review of and full disclosure of all records or any part thereof, concerning myself, by and to Sgt. M Sigrist, of the Bridgeport Police Department, whether said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records, wherever filed of complaints, arrest, trial and/ or conviction for alleged or actual violations of the law, including criminal and/or traffic records, records of complaints of a civil nature made by or against me, wheresoever located.

It is the intent of this authorization to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Bridgeport Police Department to consider in determining my suitability to legally carry a firearm in the State of Connecticut. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be.

I hereby release you, your organization or others from liability or damage that may result from furnishing the information requested.

I understand that any information obtained by the personal history background investigation that is developed directly or indirectly, in whole or in part; upon this release authorization will be considered in determining my suitability for a temporary pistol permit.

A photocopy of this release will be valid as an original hereof, even though said photocopy does not contain an original writing of my signature.

Signature: _____

Date of Birth: _____

Date: _____

Requesting Entity: _____

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
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This document must be retained by the Entity.

Noncriminal Justice Applicant's Privacy Rights

Requesting Entity: _____

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. ¹ 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. ²
- 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. ³

Updated 11/6/2019

If you need additional information or assistance, please contact:

Connecticut Records:
Department of Emergency Services and Public Protection State
Police Bureau of Identification (SPBI)
1111 Country Club Road
Middletown, CT 06457
860-685-8480

Out-of-State Records:
Agency of Record
OR
FBI CJIS Division-Summary Request
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

SIGNATURE

DATE

This document must be retained by the Entity.

¹ Written notification includes electronic notification, but excludes oral notification.

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

³ 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).