

(919) 664-7769

Fax:

Pistol Permit Application

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Ap	μπεα	ation	Date:

Raleigh, North Carolina 27602

County of Residence: WAKE (Must be a resident of Wake County)

Part A – Applicant Information	Approved	Denied Hole	d Date:				
First Name:	Maide Birth State: Age: License/ID No: Eye H	n Name: air olor:	Birth Country: Military Status: License/ID State: Height: Weight:				
Present Street Address Street No: City:		St. Suffix: Code:	How Long At Address: Home Phone:				
Present Mailing Address Street No: St. Prefix: City:		St. Suffix:	Post Office Box:				
Former Street Address Street No: City:		St. Suffix: Code:	How Long At Address:				
Present Employer Employer: City:	0: 1		Work Phone: How Long Employed:				
Part B – Pistol Permit							
I do hereby make application to the Sheriff of Wake County for a permit to purchase pistol(s). I affirm that the forgoing information is complete and accurate. Number of Permits you are applying for: (Maximum of 5)							
I affirm that I require the pistol(s) requested for one or more of the following reasons: (Check all that apply)							
Hunting: Collecting:	Target Shooting:	Protection of r	ny home, business, or property: 🔲				
I solemnly swear or affirm that I: (Cir Am / Am Not a citizen of The United S Am / Am Not currently under indictme Am / Am Not a fugitive from justice. Have / Have Not been convicted of domestical	itates. <u>Hav</u> nt for any felony. <u>A</u>	<u>ve / Have Not</u> been of felony <u>m / Am Not</u> under <u>m / Am Not</u> gettin obtair an un	convicted in any federal or state court for any (Excluding trade or anti-trust violations). r a domestic violence protective order (50B). Ing permits to assist another person in ning a firearm. Nawful user of or addicted to marijuana or lepressant, stimulant, or other narcotic drug.				
Have / Have Not to a mental institution.	petent or committed						

Applicant Signature:

Date: