#### BROCKTON POLICE DEPARTMENT

# LICENSE TO CARRY FIREARMS (LTC), FIREARMS IDENTIFICATION CARD (FID) APPLICATION GUIDELINES

Upon submitting your application, you must provide us with the documents listed below. Please be advised that if you fail to provide us with the following on the date and time of your scheduled appointment, the appointment will be cancelled and rescheduled for a later date.

- <u>APPLICATION</u>: Applications are to be completed prior to your scheduled appointment. Please be sure to answer truthfully and type or print clearly. Be advised that if your application is not completed truthfully, your LTC or FID request will automatically be denied.
- FIREARMS SAFETY COURSE: First time applicants are required to attend a Massachusetts Basic Firearms Safety Course or provide a certificate issued by the Division of Fisheries and Wildlife pursuant to the provisions of section 14 of chapter 131, evidencing completion of a Hunting Safety Course, shall serve as a valid substitute for a Firearms Safety Certificate required under this section. A certificate from either course will be required on the date of your appointment. No Safety Certificate is required for active duty military personnel.
- CITIZENSHIP: United States Citizens are required to bring their Birth Certificate, Naturalization
  Certificate or Passport to prove citizenship. Naturalized citizens are required to bring their
  Naturalization Certificate, which includes their naturalization number, date naturalized and
  location. Non-citizens must provide a valid Permanent Resident Alien Card (Green Card) which
  includes their green card number and resident since date.
- <u>LETTER TO THE CHIEF OF POLICE</u>: Applicants need to write a separate letter addressed to the Chief of Police, specifying the reasons why you are requesting such a license.
- <u>RESIDENCY</u>: Applicants must provide one of the following documents to prove residency: utility bill, phone bill, tax bill, credit card statement, etc. If a business the owner must provide a Business Certificate or Corporate Documents with an address in the City of Brockton.
- <u>RENEWAL</u>: Applicants are required to complete the application and provide proof of residency.
- <u>LICENSE FEE</u>: LTC applicants must be 21 years old. The processing fee is \$100.00 dollars, payable
  by cash or money order ONLY. A FID applicant 18 and over, the processing fee is \$100.00 dollars.
  A FID applicant 15 -17 years old is \$25.00 dollars. Renewal fee will be waived for applicants 70
  years of age and older.
- <u>APPOINTMENTS</u>: All applications are by <u>APPOINTMENT ONLY</u>. To make your appointment, please contact Officer Michael Skinner at 508-897-5214 or <u>mskinner@brocktonpolice.com</u>.
   E-mail is preferred.



CHECK ONE:

## THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY

#### Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4600 | TTY: 617-660-4606 | mass.gov/cjis

FTN:	PD USE ONLY
LIC#: _	

# Submit this form and direct any questions to your local police department

### MASSACHUSETTS RESIDENT LTC/FID/MACHINE GUN APPLICATION

FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY FIREARMS OR LICENSE TO POSSES A MACHINE GUN (M.G.L c. 140, §§ 129B, 131)

New Applicant*						
_ Renewal - Most Rece	nt License to Carr	y/FID Number:		_		
*NOTE: If application is for Hunter Safety Course Cert affidavit must be submitted	tificate must be att	entification card or lached, unless exem	license to carry firearms, a coupt by statute. If this is a ren	opy of the Fir ewal applicat	rearms Safety Certificate or ion, a lost/stolen firearms	
LICENSE APPLICAT	ION TYPE (Ch	eck Only One):				
Firearms Identification	n Card - Restricted	I (self-defense spra	y)			
Firearms Identification						
License to Carry						
License to Possess a	Machine Gun					
Gun Club License (O	nly the Colonel of	the State Police car	n issue a club license)			
Last Name		First Name	Middle	e Name	Suffix	
Residential Address		City	State	Zip Code	Telephone Number	
Mailing Address		City	State	Zip Code	Telephone Number	
Date of Birth	Place of Birth	(City, State, Countr	y)			
Mother's First Name	Mother's Maio	en 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	Telepi	hone Number	

### ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1.	Are you a citizen of the United States?		☐ YES	□ NO	
	If lawful permanent resident alien, give green card number and resident date	Green Card Number Re	Resident Since (date)		
	If naturalized, give date, place and naturalization number	Date Place Na	aturalization No.	_	
2.	Have you ever renounced your U.S. citizens	ship?	□ YES	□NC	
3.	What is your age? (You must be 21 submission of a certificate of parent or guardian granting p	to apply for a LTC, 18 to apply for a FID card, or 14 to 17 with termission to apply for a FID card or FID card — Restricted).			
4.	Have you ever been arrested or appeared in	n court as a defendant for any criminal offense?	□YES		
5.	Are you the subject of any pending criminal	charges?	□ YES	□ NC	
6.	Have you ever been convicted of a felony?		□ YES	□ NC	
7.	Have you ever been convicted of the unlaw as defined in M.G.L. c. 94C, § 1?	ful use, possession, or sale of controlled substances	□YES	□ NC	
8.	Have you ever been convicted of a violent of	crime or a crime of domestic violence?	□ YES	□ NC	
9.	Have you ever been convicted as an adult of in any state or federal jurisdiction?	or adjudicated a youthful offender or delinquent child	□ YES	□ NO	
10.	Are you now, or have you ever been the sul or a similar order issued by another jurisdict	bject of a restraining order issued pursuant to M.G.L. c. 209 tion?	A,	□ NC	
11.	Are you currently the subject of any outstan	ding arrest warrant in any state or federal jurisdiction?	☐ YES	□ NO	
12.	Have you ever been committed to any hosp	ital or institution for mental illness, or alcohol or substance a	abuse?   YES		
13.	Has any firearms license issued under the la or denied?	aws of any state or territory ever been suspended, revoked,	□YES		
14.	Have you been discharged from the armed	forces of the United States under dishonorable conditions?	□ YES	□ NC	
15.	Have you been the subject of an order of the	e probate court appointing a guardian or conservator?	□ YES		
lf yo	ou answered "YES" to any of the quinter and location; use a se	uestions 2-15, give details which must inclu parate sheet of paper if necessary.	de dates,		
-					
-					

"YES", provide name and explain: _			
ther than Massachusetts, in what	state(s), territory(ies), or jurisdiction(s) have you live	d?	□ NONE
ave you ever held a firearms licen	use in any other state, territory or jurisdiction?		□ YES □ NC
st the name and addresses of two	references (as required by your licensing authority)		
Last Name	First Name		
Address	City/Town	State	Zip
			<u> </u>
Last Name	First Name		
	First Name City/Town	State	Zip
Address  eason(s) for requesting the issual	City/Town nce of a card or license:		
Address  eason(s) for requesting the issual	City/Town  nce of a card or license:  ting		
Address  eason(s) for requesting the issual Unrestricted  Target & Hundrest Target with the reason Target and Target with the reason Target with Target with the reason Target with the reason Target with the	City/Town  nce of a card or license:  ting	of paper if necessary be punished by a file ars in a house of columberstand that any	ne of not less that rection, or by both
Address  eason(s) for requesting the issual Unrestricted  Target & Hundrest Target with the reason Target and Target with the reason Target with Target with the reason Target with the reason Target with the	City/Town  nce of a card or license:  ting	of paper if necessary be punished by a file ars in a house of columberstand that any	ne of not less that rection, or by both
Address  eason(s) for requesting the issual Unrestricted	City/Town  nce of a card or license:  ting	be punished by a fi ars in a house of counderstand that any g an application that	ne of not less that rection, or by both

### Massachusetts License to Carry (LTC)/Firearms Identification Card (FID) Affidavit

	Complete this	form <u>only</u> if you a	re <b>renewing</b>	your firear	ms license.				
	License Holder	Name:							
	Current LTC or FID card Number:								
	A.  (No firea	arm(s) lost or stolen si	ince previous i	ssuance of LTC	or FID card)				
<ol> <li>I am renewing a Massachusetts firearms identification (FID) card or license to carr (LTC) firearms.</li> </ol>									
	<ol> <li>I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last FID card or LTC.</li> </ol>								
	B.								
	(LTC) firearms.  2. the renewal or		more firear st FID card c	ms or have or LTC.	eported stole	(FID) card or licens on one or more fire ecessary.			
Lost or	Date Reported	Reported to	Туре	Make	Model	Serial Number	Case Number		
Stolen	Lost or Stolen	(Police Dept.)							
	The above info	rmation is true ar	nd accurate t	to the best o	of my knowled	lge and belief.			
	SIGNED UNDER	R THE PENALTIES (	OF PERJURY:						
	Signature:				Date:				
	- 0								

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