

**WEST VIRGINIA STATE POLICE**  
**APPLICATION FOR CONCEALED PISTOL/REVOLVER LICENSE**

(This application must be completed in ink or by typewriter)

To the Sheriff of \_\_\_\_\_ County, I, the below named applicant, swear/affirm, under penalty of law, that the information contained within this application is true and correct to the best of my knowledge.

DATE SUBMITTED: \_\_\_/\_\_\_/\_\_\_ APPLICATION TYPE:  Initial  Renewal  Honorably Discharged LEO  Sheriff Waived

NAME: \_\_\_\_\_ CONTACT #: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_  
Street City State Zip

DOB: \_\_\_/\_\_\_/\_\_\_ SSN: \_\_\_-\_\_\_-\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

COUNTRY OF CITIZENSHIP: \_\_\_\_\_ ALIEN/ADMISSION #: \_\_\_\_\_ (If not US citizen)

HT: \_\_\_ Ft. \_\_\_ In. WT: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX:  M  F EYES: \_\_\_\_\_ HAIR: \_\_\_\_\_

SCARS, MARKS, AND/OR TATTOOS (Description and location): \_\_\_\_\_

I am a bona fide resident of \_\_\_\_\_ county, WV and present the following original, valid WV issued photo ID in support of this assertion (Photocopy of ID must be attached to this application):

WV Driver's License# \_\_\_\_\_  WV Non-Driver's ID # \_\_\_\_\_  Other (Describe) \_\_\_\_\_

Answer each of the following questions by checking **YES** or **NO**:

QUESTION	YES	NO
1. Are you under 21 years of age? If yes Provisional Application form 44C must be completed		
2. Are you addicted to alcohol, a controlled substance or drug, or are you an unlawful user thereof?		
3. Have you been convicted of a felony?		
4. Have you been convicted of an act of violence or an act of Domestic Violence?		
5. Are you under indictment or do you have any criminal charges pending against you?		
6. Are you currently serving a sentence of confinement, parole, probation or other court ordered supervision due to a charge of domestic violence as provided for in 61-2-28 of the Code of West Virginia?		
7. Are you the subject of a restraining order as a result of a domestic violence act as defined in 61-2-28 of the Code of West Virginia or subject to a verified petition of domestic violence or subject to a protective order as provided for in 48-2a of the Code of West Virginia?		
8. Have you ever been adjudicated to be mentally incompetent?		
9. Do you have two (2) or more convictions for DUI related offenses?		
10. In the last three (3) years prior to this application, have you been in a residential or court ordered treatment facility for alcoholism and /or alcohol/drug detoxification treatment?		
11. If you are applying for a license to carry a concealed handgun, have you qualified under the minimum requirements for the handling and firing of a handgun as set forth in 61-7-4 of the Code of West Virginia? If <b>YES</b> , attach a copy of the certificate of completion to this application. The Sheriff will determine applicability of this section to Retired Law Enforcement Officers and Renewal Applicants.		
12. Are you physically and mentally competent to carry a handgun		

**NOTE: If any of questions 2-10 listed above are answered YES, then a brief letter of explanation for each question must accompany this form.**

I hereby authorize the Sheriff of \_\_\_\_\_ County, to conduct an investigation into information contained in this application. Furthermore, I understand that the falsification of any information contained within this application constitutes false swearing and is a misdemeanor punishable under the provisions of 61-5-2 of the Code of West Virginia.

Applicant's Signature X \_\_\_\_\_ Date \_\_\_\_\_

