

# Concealed Pistol License Application

Office use only	
ID number	_____
SID number	_____
FBI number	_____
CPL number	_____

**PRINT or TYPE** all information.

Application type <input type="checkbox"/> Original application <input type="checkbox"/> Renewal of license <input type="checkbox"/> Late renewal of license <input type="checkbox"/> Replacement license			
Name (Last, First, Middle)		CPL number, if applicable	Expiration date
Other names by which you have been known (for example: maiden name)		Driver license number	State
Physical address—required	City	State	ZIP code
Mailing address (if different)	City	State	ZIP code
Date of birth	Birthplace (City, State/Province, Country)	(Area code) Telephone number (optional)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Height ___ feet ___ inches	Weight _____ pounds	Eyes (color)	Hair color
Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino			

Race (Check all that apply)  
 Black or African American   
 American Indian or Alaska Native   
 White   
 Asian   
 Native Hawaiian or Other Pacific Islander

List type and location of all marks, scars, and tattoos

Residency

1. Are you a U.S. citizen? .....  Yes  No  
 If no, enter country of citizenship \_\_\_\_\_

2. Are you a permanent resident alien? .....  Yes  No  
 If yes, enter your permanent resident card number \_\_\_\_\_

3. Are you a legal alien temporarily residing in Washington? .....  Yes  No  
 If yes, enter your alien registration/I-94 number \_\_\_\_\_ and;  
 Enter your alien firearms license number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Answer the following

- Have you ever been convicted in adult court or adjudicated in a juvenile court of the following crimes when committed by one family or household member against another, on or after July 1, 1993: assault in the fourth degree, coercion, stalking, reckless endangerment, criminal trespass in the first degree, or violation of the provision of a protection order or no-contact order restraining the person or excluding the person from a residence? .....  Yes  No
- Are you now on bond or personal recognizance pending trial, appeal or sentence for any serious offense as defined in RCW 9.41.010 or for a felony for any crime where the judge can imprison you for more than one year? .....  Yes  No
- Have you been convicted of 3 or more violations of Washington's firearms laws within any 5-year period? ...  Yes  No
- Are you an unlawful user of, or addicted to, marijuana, or any depressant, stimulant, or narcotic drug, or any other controlled substance? .....  Yes  No
- Have you ever been adjudicated mentally defective (which includes having been adjudicated incompetent to manage your own affairs) or have you ever been committed to a mental institution? .....  Yes  No
- Have you been discharged from the Armed Forces under dishonorable conditions? .....  Yes  No
- Are you subject to a court order restraining you from harassing, stalking, or threatening your child or an intimate partner or child of such partner? .....  Yes  No
- Have you been convicted in any court of a misdemeanor crime of domestic violence? .....  Yes  No
- Have you ever renounced your United States citizenship? .....  Yes  No
- Are you an alien illegally in the United States? .....  Yes  No

Signing this application authorizes the Department of Social and Health Services, as well as mental-health institutions and other health-care facilities, to release information relevant to your eligibility for a concealed pistol license to an inquiring court or law-enforcement agency.

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place signed \_\_\_\_\_ Applicant signature **X**

**What do I need to apply for a concealed pistol license?**

- Bring a photo ID such as a valid state driver license or ID card.
- Bring your permanent resident card if you are a permanent resident alien.
- If you have an alien firearms license, bring your original passport and United States issued alien number or admission number.
- Bring your original certificate of rehabilitation or firearms restoration orders, if applicable.

**How much does it cost to apply?**

- The non-refundable fee is \$50.75 and can be paid by cash, check, or money order payable to the law enforcement agency where you are getting your license.

**Do I need to get a fingerprint or background check?**

- Yes. The law enforcement agency will take your fingerprints and conduct a background check before they issue an original CPL.
- The background check process will usually be completed within 30 days from the date you apply.
- If you do not have a valid Washington driver license or Washington state identification card or have not been a resident of Washington state for the prior 90 consecutive days, then the process may take up to 60 days.

**Are there any other requirements?**

Yes. Your application can be denied if:

- You have a concealed pistol license in a revoked status
- You are under 21 years of age
- You are subject to a court order or injunction concerning the possession of firearms
- You are free on bond or personal recognizance pending trial, appeal, or sentencing for a felony offense
- You have an outstanding warrant for your arrest from any court of competent jurisdiction for a felony or misdemeanor
- You have been ordered to forfeit a firearm within one year before filing a concealed pistol license application

**Who do I contact if I have any questions?**

- Contact your local law enforcement agency or county sheriff's office.

**CAUTION: Although state and local laws do not differ, federal law and state law on the possession of firearms differ. If you are prohibited by federal law from possessing a firearm, you may be prosecuted in federal court. A state license is not a defense to federal prosecution.**

Local law enforcement use only		
Database	Date	Checked by _____
<input type="checkbox"/> NICS	_____	_____
<input type="checkbox"/> WASIS/NCIC III	_____	_____
<input type="checkbox"/> WACIC/NCIC	_____	_____
<input type="checkbox"/> Warrant file	_____	_____
<input type="checkbox"/> DOL firearms file	_____	_____
<input type="checkbox"/> DSHS	_____	_____
<input type="checkbox"/> Local check	_____	_____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied   By _____   Date _____		