IOWA APPLICATION FOR PERMIT TO CARRY WEAPONS

[For a permit to be issued on or after January 1, 2011]

INFORMATION PROVIDED ON THIS FORM IS PUBLIC RECORD

☐ New Application

☐ Renewal Application – Permit Number _____ Permit Expiration Date _____

Renewal applications must be **received** by the issuing officer at least thirty days prior to the expiration of the applicant's current permit

Type of Permit:

☐ Professional Permit (WP1)

☐ Nonprofessional Permit (WP2)

☐ Peace Officer Permit (WP7)

☐ Reserve Peace Officer Permit (WP10)

Training Documentation:

☐ Photocopy of certificate of handgun training

☐ Affidavit attesting to completion of handgun training

☐ Honorable/general discharge or DD-214

☐ Certificate of completion of military basic training

☐ Qualified on a firing range under the supervision of a certified instructor (applies to renewal application only)

Name _____ Alias(s) _____
(last) (first) (middle) (other names ever used)

Birthdate ____ /____ /_____ Sex M F Phone (____)_____-_____ Phone (____)_____-_____
MM DD YYYY Circle

Residence _____
(city) (state) (zip)

Driver's License or Non-Operator ID#_____ Driver's License/ID State _____

Place of Birth (state or country) _____ Country of Citizenship _____

If not US citizen, alien registration # (ARN) or I-94 nonimmigrant admission # _____

Authorization for Release – Weapon Permit Applications

I, (print name here) _____, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code Ch. 724 and Iowa Administrative Code 661—Ch 91, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the 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 records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary committal for treatment including those records held by hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm. I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my qualification for obtaining a permit to carry weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that information provided on this application form is considered public record and may be disclosed upon request.

I certify that all information, including supporting documentation, provided in this application is true and correct, and I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10(3) if I make what I know to be a false statement of material fact on this application or if I submit what I know to be any materially falsified or forged documentation in connection with this application.

Applicant Signature _____ Date _____

Answer all questions on reverse side and complete employer authorization section (if applicable)

All of the following questions must be answered:

Yes	No	
☐	☐	1. Do you have charges pending in any state for a felony, or any other crime for which the court could sentence you to imprisonment for more than one year?
☐	☐	2. Have you ever been convicted in any court of a felony, or any other crime involving a firearm or explosives for which the court could have sentenced you to imprisonment for more than one year, even if you received a shorter sentence including probation?
☐	☐	3. Have you been convicted in any court within the previous three years of a serious or aggravated misdemeanor defined in Iowa Code Ch. 708 not involving a firearm or explosives for which the court could have imprisoned you for more than one year, even if you received a shorter sentence including probation?
☐	☐	4. Are you a fugitive from justice (outstanding arrest warrants)?
☐	☐	5. Are you an unlawful user of, or addicted to, any controlled substance?
☐	☐	6. Have you ever been adjudicated mentally defective (which includes a determination by a court, board, commission, or other lawful authority that you are a danger to yourself or to others or are incompetent to manage your own affairs) **OR** have you ever been committed to a mental institution?
☐	☐	7. Have you been discharged from the Armed Forces under dishonorable conditions?
☐	☐	8. 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?
☐	☐	9. Have you ever been convicted in any court of a misdemeanor crime of domestic violence?
☐	☐	10. Are you a citizen of the United States? (IF NO, immigrant must provide alien registration number (ARN); nonimmigrant must provide I-94 registration number and documentation showing an exception to the nonimmigrant alien prohibition (e.g., valid hunting license issued in any state, letter from the U.S. Attorney General granting a waiver, etc.).
☐	☐	11. Have you ever renounced your United States citizenship?

EMPLOYER AUTHORIZATION (required for Professional Permit only)

Employer Name _____ Telephone _____

Employer Address _____

Employment Justification _____

_____

Employer Signature _____ Date _____

ISSUING OFFICER (Iowa Sheriff or Commissioner of Public Safety)

Application: ☐ Approved ☐ Denied Date _____

Reason Denied: _____

_____

Written Denial Notice Provided By (method) _____ on (date) _____

☐ Sheriff of _____ County, Iowa

Signature _____ ☐ Commissioner of the Iowa Department of Public Safety