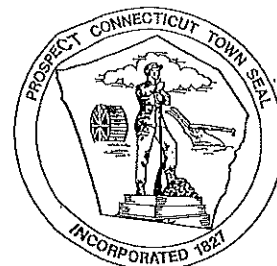




**TOWN OF PROSPECT
POLICE DEPARTMENT**
8 Center Street • Prospect, CT 06712-1699
Non-Emerg. Telephone (203) 758-6150
Fax: (203) 758-5312



**FINGERPRINT COST
FOR
PISTOL PERMIT**

**CHECK or MONEY ORDER
ONLY**

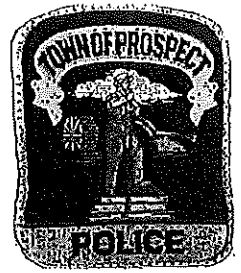
PAID TO THE ORDER OF:

TOWN of PROSPECT

\$10.00



Prospect Police Department
8 Center Street
Prospect, CT 06712



March 12, 2024

Pistol Permit Application Modifications
EFFECTIVE IMMEDIATELY

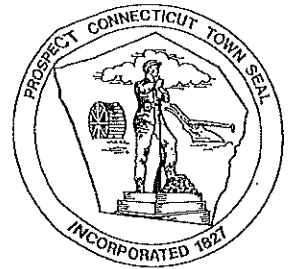
The State of Connecticut recently completed a revision to its Fingerprinting and Criminal History systems, along with application submittal procedures.

As of this date, all changes are as follows regarding payments for the State and FBI backgrounds and application submittal to the Prospect Police Department.

1. A fully completed and notarized application, along with all required documents including a privacy rights form (which will be given to you upon acceptance of your application) must be submitted to the Prospect Police Department before you are given our Service Code to be fingerprinted.
2. After completion of the instructions listed above, a Service code (**DO NOT SHARE THIS SERVICE CODE WITH ANYONE**) will be provided to applicants where you will then log into the following website while you are at the Prospect Police Dept. **<https://ct.flexcheck.us.idemia.io/CCHRSPreEnroll>**. This will enable you to pre-enroll for a Criminal History check (while using a credit card/debit card, only) at the same time as submitting your Pistol Permit Application.
4. **You will not be fingerprinted unless you have completed the entire Pistol Permit package and it has been accepted.**
5. **Reminder to bring with you the following items: Completed notarized application, all required information, a credit card/debit card to pre-enroll for your State/FBI background checks. You will also need to bring a check/money order in the amount of \$10.00 (cash will not be accepted) made out to the Town of Prospect for payment for an officer to take your fingerprints.**



**TOWN OF PROSPECT
POLICE DEPARTMENT**
8 Center Street • Prospect, CT 06712-1699
Non-Emerg. Telephone (203) 758-6150
Fax: (203) 758-5312



TO: PISTOL PERMIT APPLICANTS

RE: APPROVED HANDGUN SAFETY AND TRAINING COURSES

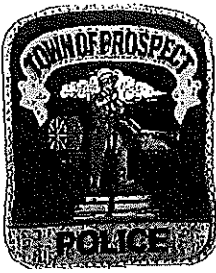
THE FIREARMS COURSE THAT HAS BEEN APPROVED BY THE COMMISSIONER OF PUBLIC SAFETY MUST CONSIST OF NO LESS THAN THE NRA'S "BASIC PISTOL COURSE".

THE NRA'S "HOME FIREARMS SAFETY COURSE" AND "FIRST STEPS PISTOL ORIENTATION PROGRAM" ARE NOT APPROVED COURSES.

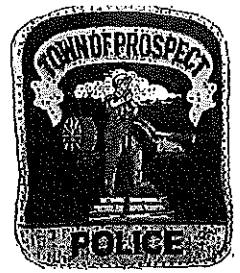
WHEN HANDING IN YOUR PISTOL PERMIT APPLICATION, YOUR NRA CERTIFICATE MUST BE SIGNED BY YOUR FIREARMS INSTRUCTOR AND IT MUST STATE ON YOUR CERTIFICATE THAT YOU HAVE COMPLETED THE "BASIC PISTOL COURSE".

**THIS COURSE MUST BE TAKEN WITHIN ONE YEAR OF SUBMITTING YOUR PISTOL PERMIT APPLICATION!
(NO EXCEPTIONS)**

THANK YOU.



Prospect Police Department
8 Center Street
Prospect, CT 06712



March 12, 2024

PROCEDURES FOR TEMPORARY STATE PISTOL PERMIT

STEP #1 The application **be MUST completely filled out using BLACK ink and NOTARIZED.**

- Attached:
- a. three (3) letters of character reference (signed, cannot be from Family members.
 - b. one (1) copy of NRA Certificate of Competency with a handgun. Handgun class must be taken within one year of application (**No exceptions**).
 - c. one (1) copy of the following documents is needed:
 - Birth Certificate
 - USA Passport or
 - Naturalization papers (if applicable)

NOTE: ALL REFERENCE LETTERS MUST HAVE NAME, ADDRESS AND PHONE NUMBER OF THE WRITER.

STEP #2 PISTOL PERMIT APPLICATION SUBMISSION/FINGERPRINTS

Please see page 1 for Complete instructions.

Fingerprints are taken at the Prospect Police Department after Application has been accepted, privacy rights have been signed and fingerprint pre-enrollment have been completed. Fingerprints are done on Tuesdays and Thursdays by appointment only. You must call (203)758-6609 to make an appt.

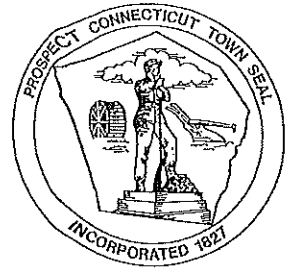
The completed pistol permit application package must be submitted to the Prospect Police Department at the time the applicant is fingerprinted. The Office Manager or Secretary will contact the applicant when the temporary permit has been issued.

The entire process takes between 4-8 weeks.



TOWN OF PROSPECT POLICE DEPARTMENT

8 Center Street • Prospect, CT 06712-1699
Non-Emerg. Telephone (203) 758-6150
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Special Licensing and Firearms Unit Public Act No. 09-3

Single Permit

Changes Effective 8/1/21
Summary

Temporary State Permit

1. Obtained at local police department/local issuing authority.

Upon applying for a Temporary State Permit, the local Police Department/local issuing authority will fingerprint you after you have pre-enrolled for a Criminal History check on line with the State of CT., along with submitting an electronic payment directly to the State of CT. After completing the above, you will then make an appointment to be fingerprinted. At that time you will submit the Completed Pistol Permit Application, along with the Electronic Payment receipt (with barcode).

- When your Temporary Permit is picked up, a check or money order for \$70.00 is needed (payable to the Town of Prospect).
- When getting your permanent Pistol Permit for the State, you will have to bring a \$70.00 money order/check with you to one of the locations listed in this packet.

2. Applicant must be at least 21 years of age
3. Valid for 60 days – cannot be renewed
4. Must reapply to local authority if expired without obtaining state permit
5. Valid to carry firearms only – NOT valid for purchase of firearms
6. State law requires fingerprinting and criminal history checks. The local authority will take fingerprints of the applicant unless the local authority

determines that the fingerprints have been previously taken and the applicant's identity has been established and verified.

- Within 5 days of receiving the application, fingerprints will be sent to SPBI by the local authority.
 - A response from the FBI is most commonly sent directly to ORI, but if SPBI receives the response, it will be forwarded to the local authority.
7. Upon receipt of the results of the local and national criminal history records check, the commissioner will send a copy of the results to the local authority.
 8. Local authority will notify you by phone when application process is complete. This can take up to 8-12 weeks, sometimes longer.
 9. No temporary state permit will be issued if the local authority has reason to believe the applicant has ever been convicted of a felony or that any other condition exists for which the issuance of a permit for possession of a pistol or revolver is prohibited. (Suitability)
 10. The original application must be forwarded to the Department of Public Safety - Special Licensing and Firearms Unit by the local authority indicating approval or denial.
 - When a permit is denied for False Statement, a copy of the application may be sent. The original application will be used as evidence in your criminal case.
 11. As of 10/01/01 local (town) permits for carrying of pistols and revolvers **will not** be issued or renewed – a Temporary State Permit will be issued.

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE



Special Licensing and Firearms Unit

PISTOL PERMIT/ELIGIBILITY CERTIFICATE APPLICATION
(Pursuant to C.G.S. §§ 29-28 et. seq., 29-36 et. seq., and 53a-217 et. seq.)

Before completing this application, it is suggested that you review the Connecticut General Statutes pertaining to firearms. These can be accessed on the Internet at www.cga.ct.gov, or through your local library.

Type of Permit Requested:

Check Box:

- 60 Day Temporary State Pistol Permit
- Non-Resident State Pistol Permit
- Eligibility Certificate to Purchase Pistols or Revolvers
- Eligibility Certificate to Purchase Long Guns

Instructions:

Instructions for State Pistol Permits:	Instructions for Non-Resident State Pistol Permits:	Instructions for Eligibility Certificates to Purchase Pistols or Revolvers and/or Eligibility Certificates to Purchase Long Guns:
<p>1. Complete this form (DPS-799-C) and submit to appropriate local authority (local police, resident state trooper or first select person, as applicable) along with all of the following:</p> <ul style="list-style-type: none"> ▪ Firearms Safety & Use Course Certificate; ▪ \$70.00 fee, payable to the local authority; and ▪ Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.). <p>2. Fingerprints are required to process this application. Please contact your local law enforcement agency for further direction on the process for obtaining fingerprints.</p> <p>3. Upon approval, the local authority will issue a Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C), effective for 60 days.</p> <p>4. Within the 60 day period, go to a DESPP, Division of State Police, pistol permit location and submit the following:</p> <ul style="list-style-type: none"> ▪ The Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C) issued by the local authority; ▪ A completed Application for State Permit to Carry Pistols and Revolvers (DPS-46-C); ▪ \$70.00 fee, payable to Treasurer, State of Connecticut; ▪ Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.); and ▪ Proof of valid state issued photo identification card. <p>5. Upon approval, your photograph will be taken at DESPP and you will be issued a state pistol permit.</p>	<p>**CALL DESPP FOR PACKET** <i>You must hold a valid permit or license to carry a pistol or revolver issued by a recognized United States jurisdiction.</i></p>	<p>**CALL DESPP FOR PACKET** <i>You must be 21 years of age to obtain a Pistol Eligibility Certificate. You must be 18 years of age to obtain a Long Gun Eligibility Certificate.</i></p>

For Department of Emergency Services and Public Protection (DESPP), Division of State Police, pistol permit locations, access www.ct.gov/despp and follow the link to the Special Licensing and Firearms Unit or call (860) 685-8290. Note: All payments must be made with separate checks.

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

Contact / Identifying Information:

Name of Applicant _____, _____
Last _____ Middle Initial _____
First _____ Suffix _____

Provide all other names by which you have been known (Maiden name, Aliases, Nicknames, etc.)
(Attach additional sheet(s), if necessary)

Date of Birth: ____/____/____
Month/Day/Year

Sex: F M Unknown/Non-binary

Height: ____ Ft. ____ In.

Weight: ____ Lbs.

Eye Color: Brown Blue Black
 Green Gray Hazel

Race: White American Indian/Alaskan Native Asian/Pacific Islander
 Black Unknown/Other

Hair Color: Brown Black Blonde Red
 Gray White Bald

Place of Birth: _____, _____
City/Town State

Social Security Number (Optional, but will help prevent misidentification): _____-____-_____

Country of Citizenship: _____
Alien Reg. Number (if applicable): _____

Residential Address (List street address. Post office box numbers are not acceptable)

Number/Street
_____, _____ State Zip Code
City/Town

List Residential Addresses for the Last 7 Years (Attach additional sheet(s), if necessary)
*Any subsequent changes of address must be reported within 48 hours to the Special Licensing and Firearms Unit

1. _____
2. _____

Mailing Address (if different from current residential address above)

Number/Street
_____, _____ State Zip Code
City/Town

Home Telephone Number: (____) ____-____
Area Code

Motor Vehicle Operator's License Number: _____
State of Issue

Alternate Telephone Number: (____) ____-____
Area Code

Email Address: _____

Employment History:

List Employers for the Last 7 Years (Provide employer's name, address and telephone number)
(Attach additional sheet(s), if necessary)

1. _____
2. _____

Permit or Eligibility Certificate History:

Have you had a firearms permit, permit application or eligibility certificate of any kind from ANY jurisdiction in the United States denied, suspended or revoked? NO YES

If "YES," provide:

1. Identify the jurisdiction which issued the denial, suspension or revocation: _____

2. Date of denial, suspension or revocation: _____

3. The reason for the denial, suspension, or revocation: _____

Medical History:

Have you been confined in a hospital for mental illness in the past sixty (60) months by order of a Probate Court?
 NO YES If "YES," explain: (Attach additional sheet(s), if necessary)

Have you been discharged from custody within the past twenty years after having been found not guilty of a crime by reason of a mental disease or defect? NO YES
If "YES," explain: (Attach additional sheet(s), if necessary)

Have you been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence? NO YES
If "YES," explain: (Attach additional sheet(s), if necessary)

Notice: DESPP herein notifies the applicant that, pursuant to C.G.S. §§ 29-28 through 29-38b, DESPP will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined to a hospital for psychiatric disabilities within the preceding sixty (60) months by order of Probate Court, or if the applicant has been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence.

Criminal History:

Have you ever been ARRESTED for any crime, in any jurisdiction? NO YES If "YES," list all arrests, indicating charges, locations, dates of arrest and dispositions. (Attach additional sheet(s), if necessary)

Notice: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to C.G.S. §§ 46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. 46b-146), an adjudication as a youthful offender (C.G.S. 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon (C.G.S. 54-142a).

With regard to criminal history information arising from jurisdictions other than the State of Connecticut: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to the law of the other jurisdiction. Additionally, you are not required to disclose the existence of an arrest arising from another jurisdiction if you are permitted under the law of that jurisdiction to swear under oath that you have never been arrested.

Have you ever been CONVICTED under the laws of this state, federal law or the laws of another jurisdiction?
 NO YES If "YES," list all convictions, include charges, location, date of arrest, and disposition. (Attach additional sheet(s), if necessary)

Are you currently on probation, parole, work release, in an alcohol and/or drug treatment program or other pre-trial diversionary program or currently released on personal recognizance, a written promise to appear or a bail bond for a pending court case? NO YES If "YES," explain. (Attach additional sheet(s), if necessary)

Within the past five (5) years, have you been the subject of a Protective Order or Restraining Order issued by a court in a case involving the use, attempted use or threatened use of physical force against another person, regardless of the outcome or result of any related criminal case? NO YES

If "YES," which court issued the order?

Military History:

Were you ever a member of the Armed Forces of the United States? NO YES (If yes, please include a copy of your DD-214)

Were you ever discharged from the Armed Forces of the United States with a less than Honorable Discharge? NO YES

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

Proof of Training:

**Attach a copy of the letter or certificate attesting that you have completed a course in the safety and use of pistols and revolvers or long guns (as appropriate, depending upon which permit or certificate you are requesting), signed by the instructor of the course.*

Instructor: (Check applicable box)

- National Rifle Association
- Department of Energy and Environmental Protection (DEEP)
- Other: _____

State Instructor's Name and ID Number: _____

Declaration:

I understand that any false statement herein, which I do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function, is punishable by law (See CGS § 53a-157b). I further understand that any statement in this application that is determined to be false or inaccurate shall constitute grounds for the denial of such application. If approved before the facts are known, such approval shall be void if based on a false or inaccurate statement. My signature below attests to the accuracy, completeness and to the truth of all information supplied on this application:

I declare, under the penalties of false statement, that the answers to the above are true and correct.

Date _____ Signed _____

STATE OF _____

Print Name _____

COUNTY OF _____

Subscribed and sworn to before me this _____ day of _____ 20_____

Name:
Notary Public
My Commission Expires:
Commissioner of Superior Court

NOTICE: Appeal Process for Permits

In the event that your application for pistol permit or eligibility certificate is denied or revoked, you may notify the Board of Firearm Permit Examiners, at 20 Trinity St., 5th Floor, Hartford, CT 06106. Telephone: (860)256-2977 OR (860) 256-2947, in writing, within ninety (90) days, in order to begin your appeal process. At a hearing before the Board, you may request that your application be reconsidered or that your permit or eligibility certificate be reinstated.

For Official Use Only

<p>Application Received:</p> <p>□□/□□/□□□□ Month/Day/Year</p>	<p>FBI Sent: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>FBI Reply: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>ICE Response: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>DMHAS: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>SPBI: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Number: _____</p>	<p>Application Status:</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Denied</p> <p>_____ (Signature and title of issuing authority)</p>
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STATE OF CONNECTICUT
 DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
 DIVISION OF STATE POLICE
 Special Licensing and Firearms Unit



Instructions to Applicants

Pistol Permits -- New	Pistol Permits -- Renewal In-Person	Pistol Permits -- Renewal by Mail
<ol style="list-style-type: none"> 1. A valid Temporary State Permit to Carry Pistols or Revolvers (DPS-11-C) must be presented in person at the Department of Emergency Services and Public Protection (DESPP) Headquarters located at 1111 Country Club Road, Middletown, Connecticut 06457-2389. 2. Proof of legal and lawful presence in the United States is required. Acceptable forms of proof include a birth certificate, U.S. passport, or documentation of permanent residence from the U.S. Citizenship and Immigration Services. 3. Payment of a \$70.00 fee is required, either by check or money order made payable to "Treasurer, State of Connecticut" or by exact cash payment. 4. Your photograph and signature will be taken at DESPP. 	<ol style="list-style-type: none"> 1. All pistol permits may be renewed in person at DESPP Headquarters ninety (90) days prior to expiration or up to ninety (90) days after expiration. No permit can be renewed after the ninety (90) day grace period following the expiration date. 2. Confirm the accuracy of the information on DPS-129-C. If corrections are required, draw a single line through any incorrect information and write in the correct information. Present the corrected form to DESPP. 3. Bring a \$70.00 check or money order made payable to "Treasurer, State of Connecticut" or exact cash payment. 4. Provide proof of being legally and lawfully in United States: U.S. Passport, Birth Certificate or Permanent Resident ID Issued by I.C.E. or Naturalization Certificate; NOTE: If Place of Birth states, "VERIFIED", you <u>do not</u> need to bring item # 4. 5. Your photograph and signature will be taken at DESPP. 	<ol style="list-style-type: none"> 1. Out-of-state pistol permits may be renewed by mail. Effective 10/01/11, in-state renewals may also be completed by mail. 2. Confirm the accuracy of the information on DPS-129-C. If corrections are required, draw a single line through any incorrect information and write in the correct information. Sign the corrected form in the presence of a notary prior to mailing. 3. Using transparent tape, attach a 2" x 2" color passport photo, taken within the previous six (6) months, in the box provided. 4. Include a \$70.00 check or money order made payable to "Treasurer, State of Connecticut." Do not send cash. 4. Proof of legal and lawful presence in the United States is required. Acceptable forms of proof include a birth certificate, U.S. passport, or documentation of permanent residence from the U.S. Citizenship and Immigration Services. Do not send originals. 5. Include a self-addressed, stamped #10 envelope.

Renewals for Armed Security Officers (Blue Cards/Class 1) and Ball Enforcement Agents (Gold Cards/Class2)

1. Follow the instructions above for Pistol Permits -- Renewal In-Person.
2. An additional check or money order for \$62.00 is required, made payable to "Treasurer, State of Connecticut."
3. Include a self-addressed, stamped #10 envelope.
4. Armed Security Officers must submit a DPS-1030-C annually as proof of completion of the handgun qualification refresher course.

Eligibility Certificates (New & Renewals)

1. New applicants must complete the DPS-799-C and DPS-164-C, and sign it in the presence of an official when your photo is taken.
2. Submit an affidavit signed by an instructor certified by the State, the National Rifle Association, or the Department of Energy and Environmental Protection stating that the applicant successfully completed a safety or training course in the use of pistols or revolvers or long guns. Such statement shall specify that the instructor was so certified at the time that he taught the course, and shall include the full name of the applicant, and the date, location and duration of the course.
3. Submit fingerprints with two (2) separate checks or money orders to cover the federal processing fee of \$13.25 and the state fee of \$75.00, both made payable to "Treasurer, State of Connecticut", for the required criminal background checks.
4. Submit an additional check or money order for \$35.00 made payable to "Treasurer, State of Connecticut" for the processing of the Eligibility Certificate. If you are appearing in person, exact cash payments will be accepted.
5. When applicable, criminal and/or mental health records must be submitted per Connecticut General Statutes Section 29-36g.
6. Renewal applicants must submit a DPS-129-C-2, with \$35.00 fee made payable to "Treasurer, State of Connecticut" and documentation of legal and lawful presence in the United States (see # 2 under "Pistol Permits New" for acceptable documents), if previously not verified. Do not mail cash.
7. Include a self-addressed, stamped #10 envelope.

Ammunition Certificates (New & Renewals):

1. New applicants must complete DESPP-417-C, and sign it in the presence of an official when your photo is taken.
2. Submit check or money order for \$35.00 made payable to "Treasurer, State of Connecticut" or exact cash payment, for the processing of the Ammunition Certificate.
3. When applicable, criminal and/or mental health records must be submitted per Connecticut General Statutes Section 29-36g
4. Renewal applicants must submit a DPS-129-C-2 with \$35.00 fee made payable to "Treasurer State of Connecticut." Do not mail cash.

SEE IMPORTANT NOTICES -- REVERSE SIDE

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE
NOTICE

Pursuant to C.G.S. §§ 29-28, 29-32, 29-36f 29-36l, and 18 U.S.C. § 922, *applications covered by these instructions will not be issued or be renewed, if:*

1. You have a **FELONY CONVICTION** in any jurisdiction.
2. You have a **MISDEMEANOR CONVICTION** in Connecticut for one of the following crimes: *After 10/01/1994*
 - a. Illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. § 21a-279
 - b. Criminally negligent homicide as specified under C.G.S. § 53a-58
 - c. Assault in the third degree as specified under C.G.S. § 53a-61
 - d. Assault of an elderly, blind, disabled or pregnant person or a person with intellectual disability in the third degree as specified under C.G.S. § 53a-61a
 - e. Threatening in the second degree as specified under C.G.S. § 53a-62
 - f. Reckless endangerment in the first degree as specified under C.G.S. § 53a-63
 - g. Unlawful restraint in the second degree as specified under C.G.S. § 53a-96
 - h. Riot in the first degree as specified under C.G.S. § 53a-175
 - i. Riot in the second degree as specified under C.G.S. § 53a-176
 - j. Inciting to riot as specified under C.G.S. § 53a-178
 - k. Stalking in the second degree as specified under C.G.S. § 53a-181d
3. You are an unlawful user of or addicted to any controlled substance (as defined in the Controlled Substances Act (21 U.S.C. 801, et. seq.).
4. You were **CONVICTED** of a **MISDEMEANOR CRIME of DOMESTIC VIOLENCE**. This means an offense that (1) is a misdemeanor under federal or state law; and (2) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, or by a person with whom the victim shares a child in common, or by a person who is cohabiting with the victim or spouse, parent, or guardian, or by any person similarly situated to a spouse, parent or guardian of the victim.
5. You were discharged from custody within the preceding 20 years after having been found **NOT GUILTY OF A CRIME BY REASON OF MENTAL DISEASE OR DEFECT** pursuant to C.G.S. § 53a-13.
6. You were **CONFINED TO A HOSPITAL** for persons with psychiatric disabilities (C.G.S. § 17a-495) within the preceding sixty (60) months by order of a Probate Court.
7. You have been voluntarily admitted to a hospital for persons with psychiatric disabilities, within the preceding six (6) months for reasons other than solely for alcohol or drug dependence.
8. You are subject to a **RESTRAINING ORDER** or **PROTECTIVE ORDER** issued by a court after notice and an opportunity to be heard has been provided to you in a case involving the use, attempted use or threatened use of physical force against another person.
9. You are the subject of a court issued risk warrant to seize firearms pursuant to C.G.S. § 29-38c(d).
10. You are an **ILLEGAL ALIEN** in the United States.
11. You are **UNDER the AGE of 21 years**.
12. You have renounced your United States citizenship.
13. You have been discharged from the Armed Forces under a dishonorable condition.
14. You are prohibited by federal law, under 18 U.S.C. 922 (g) or (n).

Please mail in your renewal or direct any questions regarding your status to DESPP Headquarters, Special Licensing and Firearms Unit, located at 1111 Country Club Road, Middletown, Connecticut 06457-2389 or by telephone at (860) 685-8290. Hours of operation are Monday through Friday 8:30 am – 4:15 pm. *Please note all locations will be closed on State and Federal holidays. Troop location may be closed during inclement weather. No appointments necessary.*

Troop E – Montville 1-395 N (between exits 6 & 9) Montville, CT 06382, telephone 860-848-6539 –
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.

Troop G – Bridgeport, 149 Prospect Street, Bridgeport, Connecticut, 06604; telephone (203) 696-2532
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.

Current schedules, hours and directions can be found at www.ct.gov/despp - click on Special Licensing and Firearms Unit link.

The Department of Emergency Services and Public Protection (DESPP) herein notifies the applicant that DESPP will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined in a hospital for persons with psychiatric disabilities within the preceding sixty (60) months by order of Probate Court, or if the applicant has been voluntarily admitted to a hospital for persons with psychiatric disabilities within the preceding six (6) months for reasons other than solely for alcohol or drug dependence. DESPP will use this information in order to fulfill its statutory obligations under Connecticut General Statutes Sections 29-28, 29-36f.