

WETHERSFIELD POLICE DEPARTMENT

TO: Pistol Permit Applicants
FROM: Rafael Medina III, Chief of Police
SUBJECT: Procedures Regarding Pistol Permit Applications
DATE: February 16, 2022

The guidelines for obtaining both a local and state pistol permit are contained in **C.G.S., sec. 29-28, 29-28a, and 28-29.**

Applicants must be at least 21 years old and a legal resident of the United States. Persons convicted of a felony or any one of 11 misdemeanor offenses detailed in the statute are ineligible to receive a permit. Persons convicted as a delinquent for the commission of a serious juvenile offense. (as defined in section 46b-120); persons discharged from custody within the preceding twenty years after having been found not guilty of a crime by reason of mental disease or defect (pursuant to section 53a-13); persons confined in a hospital for persons with psychiatric disabilities (as defined in section 17a-495), within the preceding 12 months by order of a probate court; persons subject to a restraining or protective order issued by a court in a case involving the use, attempted use or threatened use of a physical force against another person; persons subject to a firearms seizure order issued pursuant to C.G.S. 29-38c after notice and hearing; and any person who is an alien illegally or unlawfully in the United States, are prohibited from obtaining a pistol permit.

The permit is good for a period of five years. The application paperwork may be obtained from a local police department, city or town hall, or first selectman's office in the case of a local permit, or any state police barracks in the case of a state pistol permit.

You are required to complete a handgun safety course, which must consist of no less than the NRA's "Basic Pistol Course," prior to submitting the application. The NRA's "Home Firearms Safety Course" and "First Steps Pistol Orientation Program" are not approved courses.

Live fire is also required. Computer-generated programs, dry-fire, other simulated shooting tools, plastic bullets, air guns, or any other alternatives are not acceptable. Students must fire a semi-automatic pistol or revolver. Any questions should be referred to the "Special Licensing and Firearms Unit."

The NRA Home Firearm Safety Course is a 4-hour course designed to convey the skill, knowledge, and attitude to safely unload and store guns in the home, and live fire is not a part of this course.

It is our intention to issue permits to carry a pistol or revolver only to persons fully qualified. Please aid us in this regard by following, carefully, the steps included below:

STEP NO.1: Fill out, completely and accurately, the application for the permit. Any falsehoods, misrepresentations, or material omissions may be cause for rejection of the application. The applicant should completely read and understand the portion of the application that enumerates the laws concerning pistol permits. The application must be notarized in the appropriate section. **(Include a working cell phone number on the application).**

STEP NO.2: When your application is completed, go to the state pre-registration website (<https://ct.flexcheck.us.idemia.io/CCHRSPreEnroll>) (Pistol Permit Service Code: C9A1-2F35), pay their fee of \$88.25, and await your necessary barcode to be emailed to you. Then go to the town of Wethersfield website to schedule your appointment to be fingerprinted on the specified dates and at the specified times. At the time of your fingerprinting, you must submit (a) your completed application; (b) a check or money order in the amount of \$70.00 made payable to the ‘Town of Wethersfield’; (c) proof of citizenship (i.e.: birth certificate, or passport – not expired); (d) resident alien card or naturalization certificate if applicable; (e) if you are a member of the military we need a copy of your DD-14 form showing discharge status (we cannot process your application without it); (f) Valid Connecticut Residence Identification (i.e.: driver’s license).
Please Note: We do require proof of Residency in Town.

STEP NO.3: You are required to furnish a letter or certificate attesting to your competence with a handgun, signed by one of the following:

- (a) NRA Certified Pistol Instructor
- (b) Police Firearms Instructor

STEP NO.4: Once your fingerprints have been checked by the Wethersfield Police, the State Police, and the FBI, and your application file has been evaluated and it is determined that you are a suitable person, the Wethersfield Police Chief will issue you a Temporary State Pistol Permit. The permit is valid for sixty (60) days.

STEP NO.5: Once you have obtained the temporary permit you must, within sixty (60) days personally submit that to Connecticut State Police Headquarters to obtain the regular State permit that is good for five (5) years.

NOTE:

Fingerprinting Hours Are Below. An appointment **MUST BE MADE IN ADVANCE!**

Tuesday 9:00 am – 10:00 am

Thursday 1:00 pm – 2:00 pm

1. Go to Town of Wethersfield website (Wethersfieldct.gov)
2. Under Key Links (in blue on right of screen) select **Police**.
3. Under Additional Links (center of screen) select **Services**.
4. Under Services they go all the way to the bottom and read the information for fingerprints. The link for scheduling is in this information.



**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. Submit fingerprints for a criminal history check through a law enforcement agency. Fees include a \$75.00 fee and a \$13.25 fee, payable at the agency where the prints are taken. Fees must be paid by separate checks.</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 style="text-align: center;">**CALL DESPP FOR PACKET** You must hold a valid permit or license to carry a pistol or revolver issued by a recognized United States jurisdiction.</p> <p>Complete this form and submit to DESPP, Division of State Police, pistol permit location along with all of the following:</p> <ul style="list-style-type: none"> ▪ Completed State of CT and Federal fingerprint card with \$75.00 fee and \$13.25 fee, payable to Treasurer, State of Connecticut for criminal history background checks; ▪ Firearms Safety & Use Course Certificate; ▪ \$70.00 fee, payable to Treasurer, State of Connecticut; ▪ Completed Application for State Permit to Carry Pistols and Revolvers form (DPS-46-C); ▪ Completed DPS-129-C signed and notarized and 2x2 color photograph (passport style); ▪ Copy of the permit or license to carry a pistol or revolver issued to you by a recognized United States jurisdiction; ▪ 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>Out of State Pistol Permit Information: State of Issue: _____ Expiration Date: _____ Permit Number: _____</p>	<p>1. Complete this form and submit in person at DESPP Headquarters, Division of State Police, located at 1111 Country Club Road, Middletown, Connecticut along with the below:</p> <ul style="list-style-type: none"> ▪ Firearms Safety & Use Course Certificate; ▪ \$35.00 fee, payable to Treasurer, State of Connecticut; ▪ Application for a State Eligibility Certificate for a Pistol or Revolver or for Long Guns (DPS-164-C); ▪ 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>2. Submit fingerprints for a criminal history check through a law enforcement agency. Fees include a \$75.00 fee and a \$13.25 fee, payable at the agency where the prints are taken. Fees must be paid by separate checks.</p> <p>3. Upon approval, your photograph will be taken at DESPP and you will be issued an eligibility certificate.</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

<input type="text"/>	<input type="text"/>
Last	Suffix
<input type="text"/>	<input type="text"/>
First	Middle Initial

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

Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> X	Height <input type="text"/> Ft. <input type="text"/> In.	Weight <input type="text"/> Lbs.	Eye Color <input type="checkbox"/> Brown <input type="checkbox"/> Blue <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Gray <input type="checkbox"/> Hazel
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Race <input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Unknown <input type="checkbox"/> Other	Hair Color <input type="checkbox"/> Brown <input type="checkbox"/> Black <input type="checkbox"/> Blonde <input type="checkbox"/> Red <input type="checkbox"/> Gray <input type="checkbox"/> White <input type="checkbox"/> Bald
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Place of Birth <input type="text"/>	Social Security Number (Optional, but will help prevent misidentification) <input type="text"/> - <input type="text"/> - <input type="text"/>
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Country of Citizenship <input type="text"/>	Alien Reg. Number (If applicable) <input type="text"/>
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Residential Address (List street address. Post office box numbers are not acceptable)

<input type="text"/>	<input type="text"/>
Number/Street	State
<input type="text"/>	<input type="text"/> - <input type="text"/>
City/Town	Zip Code

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)

<input type="text"/>	<input type="text"/>
Number/Street	State
<input type="text"/>	<input type="text"/> - <input type="text"/>
City/Town	Zip Code

Home Telephone Number (<input type="text"/>) <input type="text"/> - <input type="text"/>	Motor Vehicle Operator's License Number <input type="text"/>
Alternate Telephone Number (<input type="text"/>) <input type="text"/> - <input type="text"/>	<input type="text"/>
Area Code	State of Issue

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: _____

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

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 C.G.S. § 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 Firearms Permit Examiners, at 165 Capitol Ave., Suite 1070, Hartford, CT 06106. Telephone: (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:

Application Received:

□□/□□/□□□□
 Month/Day/Year

FBI Sent: No Yes
 FBI Reply: No Yes
 ICE Response: No Yes
 DMHAS: No Yes
 SPBI: No Yes
 Number: _____

Application Status:

Approved Denied

 (Signature and title of issuing authority)