

**APPLICATION TO PURCHASE A FIREARM - SECTION 29-33 OF THE CONNECTICUT GENERAL STATUTES REV.1999**

**WEAPON TYPE:** \_\_\_\_ **HANDGUN** \_\_\_\_ **LONG GUN** **SALE AUTHORIZATION NUMBER**\_\_\_\_\_

**NAME** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_  
LAST FIRST MIDDLE MM/DD/YYYY

**PRESENT ADDRESS** \_\_\_\_\_  
(Post office boxes will not be accepted) NUMBER STREET CITY STATE ZIP

**SEX** \_\_\_\_ **RACE** \_\_\_\_\_ **HEIGHT** \_\_\_\_\_ **WEIGHT** \_\_\_\_\_ **EYE COLOR** \_\_\_\_ **SOCIAL SECURITY** \_\_\_\_\_  
OPTIONAL

**STATE PISTOL PERMIT or**  
**ELIGIBILITY CERTIFICATE NUMBER** \_\_\_\_\_ **EXPIRATION DATE** \_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
**DRIVERS LICENSE NUMBER & STATE** **HUNTING LICENSE NUMBER (SHOTGUN & RIFLE ONLY)**

\_\_\_\_\_  
**NAME OF SALES PERSON** **POLICE I.D. NUMBER & DEPARTMENT**

- A. Have you ever been convicted in any court of a felony?  **YES**  **NO**
- B. Are you now the subject of a restraining 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?  **YES**  **NO**
- C. Have you ever been confined in a hospital for mental illness within the past twelve (12) months by order of a probate court?  **YES**  **NO**
- D. Have you been discharged from custody within the past twenty (20) years after having been found not guilty of a crime by reason of mental disease or defect?  **YES**  **NO**
- E. Have you been convicted in any court of a misdemeanor crime of domestic/family violence?  **YES**  **NO**
- F. Are you now subject to a Firearms Seizure Order issued pursuant to Public Act 99-212 Section 18, prohibiting the possession of firearms?  **YES**  **NO**

Information provided on this application is subject to verification from sources including probate, civil and criminal courts as well as governmental agencies pursuant to State and Federal Law, e.g., P.A. 98-129 (An Act Concerning Handgun Safety) and 18 USC 922 (The Brady Act), as may be amended.

**I CERTIFY THAT THE ABOVE ANSWERS ARE TRUE AND CORRECT. I UNDERSTAND THAT PROVIDING FALSE INFORMATION ON THIS DOCUMENT IS A VIOLATION OF P.A. 99-212 AND CONSTITUTES A CLASS D FELONY.**

\_\_\_\_\_  
**Signature of Purchaser** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**I UNDERSTAND THAT A PERSON WHO ANSWERS, "YES" TO ANY OF THE ABOVE QUESTIONS IS PROHIBITED FROM PURCHASING A FIREARM.**

\_\_\_\_\_  
**Signature of Dealer/Seller** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**THESE FORMS ARE TO BE FILLED OUT COMPLETELY AND LEGIBLY BY SELLER AND PURCHASER**  
**DPS-67-C (REVISED 01/01) Previous editions are obsolete.**