

Form 2

AFFIDAVIT

Before retirement, I was *either* (**choose one**)

regularly employed as a law enforcement officer for fifteen (15) or more years aggregated

Or

retired after completing probation due to a service-connected disability as determined by the agency from which I retired.

I intent to fire: (**choose one**): Revolver Semi-Automatic Both

Mark Yes or No	Yes	No
The law enforcement agency from which I retired issued me a photographic identification.		
I retired in good standing as a law enforcement officer: Agency: _____ City: _____ State: _____		
Retired for reasons of mental instability		
I was authorized to engage in or supervise the prevention, detection, investigation, or prosecution of, or the incarceration of any person for any violation of law, and I had statutory powers of arrest.		
I have a non-forfeitable right to benefits under my agency’s retirement pension plan		
If you responded no to the above question, can you provide a letter (s) from each law enforcement agency you worked for showing an aggregate of 15 years of service and stating you left in good standing and the reason why you did not participate in a retirement system.		
I affirm that I am not under the influence of alcohol or another intoxicating or hallucinatory drug substance, or currently in drug or alcohol rehabilitation, and I will not carry a firearm while I am under the influence of alcohol or another intoxicating or hallucinatory drug or substance.		
I affirm that I am not prohibited by Federal or State law from receiving a firearm.		
I understand that the definition of “firearm” does not include any machine gun, firearm silencer, or destructive device.		
I understand that I must carry the issued certification card, along with the photographic identification issued by my agency when I carry a concealed weapon.		
I understand that my certification expires twelve months from the date of issue, and it is my responsibility to reapply if I wish to continue to carry under this law.		
I understand that this authorization applies only to the weapon-type with which I qualified.		
I understand that this certification does not give me any right whatsoever to exercise law enforcement authority or take police action under any circumstances.		

I swear or affirm under penalties of perjury that the information provided in this questionnaire is true to the best of my knowledge, information, and belief.

Print Name

Signature

Date