

The Commonwealth of Massachusetts Criminal History Systems Board Firearms Record Bureau 200 Arlington Street, Suite 2200 Chelsea, MA 02150

 Application

 for License to Sell Rent or Lease Firearms, Rlfles, Shotguns, and Machine Guns; To Perform Services as a Gunsmith; or to Sell Ammunition. (M.G.L. c.140 s.122, s.123, s.124)

			DATE:			
CITY OR TOWN OF:			STATE LICENSE #:			
*FEDERAL FIREARMS LICE	NSE #:					
*You must have a federal fire						
I,						
First Name	Ν	liddle Name	Last	Name	Suffix	
DBA: Name of Firm or Corporation		Business Telephone Number				
Business Address			City	State	Zip Code	
Herby Make Application To:	(check appro	oriate box)				
Sell, Rent, or Lease Fire	arms, Rifles, Sł	otguns and Machin	e Guns			
Perform Services as a G	unsmith					
Sell Ammunition						
Residential Address		City	City		Zip Code	
Date of Birth Place of	Birth					
Mother's First Name Mother's Maiden Name		Father's First Name	Father's Last Name			
Height Weight	Build	Complexion	Hair Color	I	Eye Color	
Occupation			Social Security Nu	mber (Optional)	Drivers License Number	
Employed By			Business Address			
City/Town	State		Zip	Telepho	ne Number	

Please Answer the Following Questions Completely and Accurately

1.	Is the location of your business zoned for business, or do you have a special waiver to oporate a business there?						
2.	Are you a citizen of the United States?						
3.	If naturalized give date, place and naturalization number Date Place Naturalization No.						
4.	Have you ever used or been known by another name?						
	If yes, provide name and explain:						
5.	What is your age? *You must be 21 years of age to apply for a Dealer's License.						
6.	Have you ever been convicted of a felony?						
7.	Have you ever been convicted of the unlawful use, possession, or sale of narcotic or harmful drugs as defined in M.G.L. c. 94C?						
8.	Have you ever been convicted of a crime punishable by more than one (1) year?						
8.	In any state or federal jurisdiction have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child for the commission of (a) a felony; (b) a misdemeanor punishable by imprisonment for more than 2 years; (c) a violent crime as defined in MGL C140.s.121; (d) a violation of any law regulating the use, possession, ownership, sale, transfer, rental, receipt or transportation of weapons or ammunition for which a term of imprisonment may be imposed; or (e) a violation of any law regulating the use, possession or sale of controlled substances as defined in section 1 of MGL 94C?						
9.	Have you ever been confined to any hospital or institution for mental illness?						
10.	Are you or have you ever been under treatment for or confinement for drug addiction or habitual drunkenness?						
11.	Have you ever appeared in any court as a defendant for any criminal offense (excluding non-criminal traffic offenses)?						
12.	Are you now under any charge(s) for any offense(s) against the law?						
13.	Are you now or have you ever been the subject of a M.G.L. C209A restraining order or involved in a domestic violence charge?						
14.	Has any License to Carry Firearms, Permit to Possess Firearms, or Firearms Identification Card, License to sell, rent, or leases firearms, rifles, shotguns, machine guns, License to perform services as a gunsmith or license to sell ammunition issued under the laws of any state or territory ever been suspended, revoked, or denied?						

15. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction?

If You Answered "YES" to any of the Questions 5-15, Give Details Which Must Include Dates, Circumstances and Location

Other than Massachusetts, in what state, territory or jurisdiction have you resided?					
Have you ever held a License to sell, rent, or leases firearms, rifles, shotguns and machine guns, a license to perform services as a gunsmith or a license to sell ammunition issued under the laws of any state or territory?					
If "YES", when, where and license number?					

List the Name and Addresses of Two References

1.				
	Last Name	First Name		
	Address	City/Town	State	Zip
2.				
	Last Name	First Name		
	Address	City/Town	State	Zip
Rea	ison(s) for requesting the issuance of a card o	or license:		
\$50	ARNING* Any person who knowingly files an a 0 nor more than \$1,000 or by imprisonment fo h fine and imprisonment (MGL c.140, s.131).			
will	clare the above facts are true and complete t be just cause for denial or revocation of my L ssachusetts General Law Chapter 140, Section	icense to Carry Firearms and m		
Sigr	ned under the penalties of perjury this	day of	month	
		day	month	year
Sigr	nature of Applicant:			
Title	e: (Proprietor, Manager, etc.)			