	State of Ohio Application for License to Carry a Concealed Handgun				
	Type or Print in Ink	Issuing Agency Use Only			
		License #: Date Issued:			
		Type: Original Renewal	Receipt #		
	SECTION I				
	This application will not be processed	d unless all applicable questi	ons have been	answ	vered
	and until all required supporting doc				
I am applying for a:	Section 2923.125(B) or (F) and, unle				
□ new license	ew license forms of payment.				
 □ renewed license □ CLEO certification 	SECTION II				
	Name of Applicant:				
	Last	First		Middle	9
	County of Residence:	Date of Bir	th:		
				D/YYY)	
	Current Residence:				
Applicant Dhota	Street	City	Sta	ate	ZIP
Applicant Photo	Mailing Address (if different from abo	ove):			
	Street	City	Sta	ite	ZIP
	Social Security Number (optional):	Place of Bi	rth:		
	Residence Telephone Number:	Cell Phone	:		
SECTION III ANSWER THE FOLLOWING QU	Sex of Applicant: Male Female	Race/National Origin o			/Pacific der inic
(1) Are you legally living in th	ne United States?			YES	□ NO
	r the past five years or more?				
	s of age? istice?				
	leral law from possessing a firearm?				
ORDERED SEALED OR EXPUN	IONS 6, 7A, 7B, DO NOT INCLUDE ANY (NGED OR RELATIVE TO WHICH A COURT OR A CONVICTION FOR A MINOR MISD	HAS GRANTED RELIEF FROM			
	t for or otherwise charged with a felony , or have you ever been adjudicated as	-			
	y if committed by an adult?		-	YES	□ NO
(7A) Are you under indictmen	t for, or otherwise charged with, or have	e you been convicted of, or pl	leaded		
	r ORC 2925, 3719, or 4729, that involv				
	on of, or trafficking in a drug of abuse?. Idicated a delinquent child for committi			TES	
	under ORC 2925, 3719, or 4729, that in	-	•		
	ion of, or trafficking in a drug of abuse?			YES	□ NO

SECTION III, continued

(8)	Have you ever been convicted of, or pleaded guilty to, a misdemeanor offense of violence, charge of domestic violence, or a similar offense, in this or any other state?	. 🗆 YES	□ NO
(9)	Are you under indictment for, or otherwise charged with, or, except for a conviction or guilty plea the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, have you been convicted of or pleaded guilty to, within three years of the date of this application, except for a conviction or guilty plea the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, a misdemeanor that is an offense of violence or the offense of possessing a revoked or suspended concealed handgun license, or, except for a conviction or guilty plea the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, have you been adjudicated as a delinquent child within three years of the date of this application for committing an act that would be a misdemeanor of that nature, if committed by an adult?	.□YES	□ NO
(10)	Are you under indictment for or otherwise charged with, or, except for a conviction or guilty plea the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, or have you been convicted of or pleaded guilty to, within 10 years of the date of this application, resisting arrest, or, except for a conviction or guilty plea the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, have you been adjudicated as a delinquent child for committing, within 10 years of the date of this application, an act that if committed by an adult would be the offense of resisting arrest?	□YES	□ NO
(11)	 (a) Are you under indictment for, or otherwise charged with, assault or negligent assault? (b) Have you been convicted of, pleaded guilty to, or adjudicated as a delinquent child two or more times for committing assault or negligent assault within five years of the date of this application? (c) Except for a conviction, guilty plea, or delinquent child adjudication the records of which a court has ordered sealed or expunged or relative to which a court has granted relief from disability pursuant to ORC 2923.14, have you ever been convicted of, pleaded guilty to, or adjudicated as a delinquent child for assaulting a peace officer? 		□ NO
(12)	 (a) Have you ever been adjudicated as mentally incompetent or mentally defective?	YES	□ NO □ NO
(13)) Are you currently the subject of a civil protection order, a temporary protection order, or a protection order issued by a court of this or any other state?	YES	□ NO
(14)	Are you currently subject to a suspension imposed under ORC 2923.128(A)(2) of a license to carry a concealed handgun or a temporary emergency license to carry a concealed handgun that previously was issued to you, or are you subject to a similar suspension by another state?	YES	□ NO
(15)) Are you a member of the United States Military on permanent change of station (PCS) orders to Ohio?	YES	□ NO
(16)) Are you a permanent resident of Ohio on permanent change of station (PCS) orders to a military assignm outside of Ohio?		□ NO
(17)	Are you a resident of another state?	YES	□ NO
	State of residence If a resident of another state, are you employed in Ohio?	□YES	□ NO

SECTION IV THESE QUESTIONS ARE REQUIRED TO DETERMINE IF YOU CAN PASS THE NATIONAL INSTANT CRIMINAL BACKGROUND CHECK SYSTEM AND RECEIVE AN OHIO CONCEALED HANDGUN LICENSE: (1) Are you under indictment or information in any court for a felony, or any other crime, for which (2) Have you ever been convicted in any court of a felony, or any other crime, for which the judge could have imprisoned you for more than one year, even if you received a shorter sentence, including probation? (3) Are you a fugitive from justice? (4) Are you an unlawful user of, or addicted to, marijuana or any depressant, stimulant, narcotic (5) Have you ever been adjudicated mentally defective (which includes a determination by a court, board, commission, or other lawful authority that you are a danger to yourself or others or are incompetent to manage your own affairs) or have you ever been committed to (7) Are you subject to a court order restraining you from harassing, stalking, or threatening your (8) Have you ever been convicted of, pleaded guilty to, or adjudicated a delinquent child in any (12) If you are an alien admitted to the United States under a nonimmigrant visa, do you fall within any of the exceptions set forth in the instructions to question 12 on the ATF Form 4473? (If you (13) What is your state of residence (if any)?_____ (14) What is your country of citizenship?_____

(15) If you are not a citizen of the United States, what is your U.S.- issued alien number or admission number?______

SECTION V

YOU MUST COMPLETE THIS SECTION OF THE APPLICATION BY ANSWERING THE QUESTION POSED IN PART (1) BELOW AND, IF THE ANSWER TO THE QUESTION IS "YES," BY PROVIDING IN PART (2) THE INFORMATION SPECIFIED. IF YOU NEED MORE SPACE, COMPLETE AN ADDITIONAL SHEET WITH THE RELEVANT INFORMATION, ATTACH IT TO THE APPLICATION, AND NOTE THE ATTACHMENT AT THE END OF THIS SECTION.

- Have you previously applied in Ohio or in any other state for a license to carry a concealed handgun or a temporary emergency license to carry a concealed handgun?...... □YES □ NO
- (2) If your answer to the question in part (1) of this section of the application is "yes," you must complete this part by listing each county in Ohio, and each other state, in which you previously applied for either type of license and, to the best of your knowledge, the date on which you made the application.

Previous application made in_		_ on	
	Ohio County or Other State	-	Application Date
Previous application made in_	Ohio County or Other State	_ on	Application Date
Previous application made in_	Ohio County or Other State	_on	Application Date

SECTION VI

AN APPLICANT WHO KNOWINGLY GIVES A FALSE ANSWER TO ANY QUESTION OR SUBMITS FALSE INFORMATION ON, OR A FALSE DOCUMENT WITH, THE APPLICATION MAY BE PROSECUTED FOR FALSIFICATION TO OBTAIN A CONCEALED HANDGUN LICENSE, A FELONY OF THE FOURTH DEGREE, IN VIOLATION OF ORC 2921.13.

- (1) I have read the publication that explains Ohio firearms laws, provides instruction in dispute resolution and explains the Ohio laws related to that matter, and provides information regarding aspects of the use of deadly force with a firearm, and I am knowledgeable of the provisions of those laws and of the information on those matters.
- (2) I desire a legal means to carry a concealed handgun for defense of myself or a member of my family while engaged in lawful activity.
- (3) I have never been convicted of or pleaded guilty to a crime of violence in the state of Ohio or elsewhere (if you have been convicted of or pleaded guilty to such a crime, but the records of that conviction or guilty plea have been sealed or expunged by court order or a court has granted relief pursuant to ORC 2923.14 from the disability imposed pursuant to ORC 2923.13 relative to that conviction or guilty plea, you may treat the conviction or guilty plea for purposes of this paragraph as if it never had occurred). I am of sound mind. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statements herein I am subject to penalties prescribed by law. I authorize the sheriff or the sheriff's designee to inspect only those records or documents relevant to information required for this application.
- (4) The information contained in this application and all attached documents is true and correct to the best of my knowledge.

TO BE COMPLETED BY THE ISSUING AUTHORITY ONLY

Certificate of Competency:]Original □ Renewal	□ Prior Equivalent			
If Original or Renewal, Date C	Certificate Issued:		Entity Name:		
	Instructor Name: .		ID #:		(OPOTC or NRA ID #)
If Prior Equivalent, what type	: 🗆 Law Enforcement	Retirement date:			
What documents have been	provided to evidence	Prior Equivalent Training I	Experience:		
	□ Military • Active/	Reserve, provide Active D	uty credentials		
	Retired	d/Honorable Discharge, da	ate:		
What documents have been	provided to evidence	Prior Equivalent Training I	Experience:		
Does Competency Certification	on provided meet the	requirements specified in	n ORC 2923.125(B)(3)(a)-(f	i)? □Yes □No	
Application received:		Name o	of Intake Person:		
	(MM/DD/YYYY)				
Application review is to be co		Application	n reviewed by:		Date:
	(14114	,,			
Foreign notification sent:	(MM/DD/YYYY)	Foreign notificatio	on response received:	(MM/DD/YYYY)	
	(1111) 00, 1111)			((((())))))))))))))))))))))))))))))))))	
Background completed:	(MM/DD/YYYY) Ba	ackground records destroy	/ed:	_ Destroyed By:	
Approved date:					
Process suspended date:	R	eason:			
Denied date:	R	eason:			
LEADS entry date:	Entr	ry #:	Entered By:		
NICS Response:				Date:	(MM/DD/YYYY)
NOTEC.					

NOTES: