CHAPTER 7416 DEPARTMENT OF PUBLIC SAFETY FIREARMS PERMIT STANDARDS

7416 0100	APPLICATION FOR A HANDGUN
	TRANSFEREE PERMIT
7416 0300	REPORT OF TRANSFER OF A
	HANDGUN
7416 0400	APPLICATION FOR A PERMIT TO
	CARRY A PISTOL
7416 9911	MINNESOTA UNIFORM FIREARM
	APPLICATION/RECEIPT TRANSFEREE
	PERMIT OR REPORT OF TRANSFER
	FOR FIREARMS

7416 9931 MINNESOTA UNIFORM HANDGUN APPLICATION/RECEIPT CARRY PERMIT FOR HANDGUN IN PUBLIC PLACE

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7416.0100 APPLICATION FOR A HANDGUN TRANSFEREE PERMIT.

An application for a handgun transferee permit must be made on a form entitled "Minnesota Uniform Firearm Application/Receipt Transferee Permit or Report of Transfer for Firearms " A facsimile of the form is reproduced at part 7416 9911

Statutory Authority: MS s 624 7151

History: 19 SR 1151

7416.0300 REPORT OF TRANSFER OF A HANDGUN.

A report of transfer of a handgun must be made on a form entitled "Minnesota Uniform Firearm Application/Receipt Transferee Permit or Report of Transfer for Firearms" A facsimile of the form is reproduced at part 7416 9911

Statutory Authority: MS s 624 7151

History: 19 SR 1151

7416.0400 APPLICATION FOR A PERMIT TO CARRY A PISTOL.

An application for a permit to carry a pistol must be made on a form entitled "Minnesota Uniform Firearm Application/Receipt, Carry Permit for Handgun in Public Place " A facsimile of the form is reproduced at part 7416 9931

Statutory Authority: MS s 624 7151

History: 19 SR 1151

7416.9910 [Repealed, 19 SR 1151]

FIREARMS PERMIT STANDARDS 7416.9911

7416.9911 MINNESOTA UNIFORM FIREARM APPLICATION/RECEIPT TRANSFEREE PERMIT OR REPORT OF TRANSFER FOR FIREARMS.

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MINNESOTA UNIFORM FIREARM APPLICATION/RECEIPT TRANSFEREE PERMIT OR REPORT OF TRANSFER FOR FIREARMS								
			(TYPE OR PI	NINT ONLY)				
NOTICE TO APPLICANT An incomplete application will be denied in the event an applicant is found to have knowingly falsified this application omitted pertunent information that person may be subject to criminal prosecution. The transferce permit shall be void at the time that the hold becomes prohibited from possessing a plotiol under section 624 713 in which event the holder shall return the permit whilm free (5) days to the issue authority. The wating pened for reports of transfer will begin on the date of the delivery of this application to the chief of police or sheriff								
NOTICE TO LICENSED DEALE completed in addition to the appl days or it will not be considered	R This Icant inf	form must be comp ormation This appli	oleted in its entir cation must be d	ety or it will be d lelivered to the la	lenied The sec w enforcement	tion ma agency	rked Deal having ju	ler Information must be risdiction within three (3)
DEALERS NAME (BUSINESS NAME)		-	DEALER INFO	UNMATION		FFLIC	ENSE NUMBE	R.
DEALER STREET ADDRESS			ſ	אזג		STATE		ZIP CODE
	RE (D	DATE OF AGREEMENT TO	TRANSFER	IGNATURE OF DEALE	A REPRESENTATIVE			
· ·				ES ADVISORI				
The Minnesota Data Practices Act requires that you be advised of the following information As an applicant for a permit to purchase a firesem for reporting the transfor of a firesem or permit to carry a handgun you are being asked to provide private and/or confidential data about yourself which will be used to check criminal histories arrest records and warrant information to determine you eligibility to posses a firearm and/or carry a handgun. You may refuse to provide this information however should you refuse the investigation cannot be completed and will result in your application on being processed information regarding "pervisions residence addresses (part 10 years)" is optional However if provided it will refuse the possibly or error regarding older records. The information that you provide will be used by the licensing agency to complete its investigation and may be conveyed to other law enforcement agences.							it in your application not I reduce the possibility of	
I HAVE READ AND UNDERSTAND THE ABOVE DATA PRACTICES ADVISORY APPLICANT SIGNATURE DATE								
	AUTH	ORIZATION FOR	RELEASE	F COMMITM	INT INFORM	ATIO	N	
authorize the release of commiti possess a firearm and/or carry completed and will result in your	AUTHORIZATION FOR RELEASE OF COMMITMENT INFORMATION As an applicant for a permit to purchase a fream reporting the transfer of a term or for a permit to carry a handjun you are being asked authorize the release of comments handjun. You may refuse the Commissioner of the or Servecs which will be used to determine your eligibility permitted and will result in your application not being processed						termine your eligibility to investigation cannot be	
 (type or pant your name) Services to disclose commitment 	t inform	ation to the extent th	e information re	lates to my eligib	ility to possess			Commissioner of Human niautomatic military style
Services to disclose commitment information to the extent the information relates to my eligibility to possess a handgun or semiautomatic military style assault weapoin under Minnesca Statute §624 713 subdivision 1 to the local police authority reviewing this application for the purpose of conducting the background investigation required by Minnesota Law								
APPLICANT SIGNATURE						DATE		
NOTE This consent is subject reliance on it. If not previously re	NOTE This consent is subject to revocation at any time except to the extent that the Commissioner of Human Services has already taken action in retiance on it. If not previously revoked this authorization will terminate upon notification to the applicant of the denial or grant of this application						s already taken action in of this application	
				TO DI LA MONT				
NAME (LAST FIRST MIDDLE JR/SR)		A	PPLICANT IN	FORMATION	САТЕ OF ВІЯТН.			HOME PHONE NUMBER.
WAIDEN NAME (IF APPLICABLE) OR OTHER	NAMES Y	OU HAVE USED			I			·
PRESENT REBIDENCE ADORESS			CITY		COUNTY		STATE	ZIP CODE
RACE. SEX. HEIGHT		WEIGHT	EYE COLOR	HAIR COLOR.	MN DRIVERS LICE	NSE OR I	d Number	
DISTINGUISHING PHYSICAL CHARACTERIS	TICS (INCI	JUDING SCARS MARKS T	ATTOOS ETC)	L	1			

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7416.9911 FIREARMS PERMIT STANDARDS

В

_	STREET ADDRESS	EVIOUS RESIDENCE (PAS	T 10 YEARS)	COUNTY	154	ZIPC	
_	STREET ADDRESS	UIY		COUNTY	STATE	219 04	JDE
_							
			1				
_				_			
1	Have you been convicted of a crime of violence either (1) been restored to your civil rights at leas if yes, complete the following information	as defined in Minn Stat. 62 ist 10 years ago or (2) your s	4 712 in Minne entence expire	sota or els d at least 1	where and not O years ago?		
	CONVICTION DATE(S)	(5)					
	LOCATION OF CONVICTION (CITY COUNTY STATE).						
2	Have you been convicted after August 1 1992,	of assault in the fifth degree	under Minn St	at 609 224	?		
	If yes, was the assault committed within three ye		nviction under	Minn Stat	609 221 to	_	_
	609 224 OR was the assault victim a family or h	ousehold member?					□ YES
	If yes, complete the following information						
	CONVICTION DATE(S)	(5)					
	LOCATION OF CONVICTION (CITY COUNTY STATE)						
					1		
3.	Have you been convicted of a crime punishable punishment was actually imposed? If yes, complete the following information (CONNCTION DATE(6), CRIME	-	n exceeding of	ie year reg	ardless of what	□ no	□yes
	LOCATION OF CONVICTION (CITY COUNTY STATE)						
4	Have you ever been pardoned for a come of vio If yes, complete the following information	lence?	-				
		AL CHARGE.		_			
					1		
	LOCATION OF ORIGINAL CONVICTION (CITY COUNTY STATE)						
	Under the law of the jurisdiction where you were pardoned or have you had your civil nghts resto (Attach a copy of documentation establishing th you have had your civil rights restored)	red?	•			סא 🗆	□ yes
5	Have you ever been convicted for the unlaw conviction for possession of small amount of Ma	iul use possession or sale rijuana as defined in Minn S	of a controllinat 152.01. Sui	ed substan bd 16)?	ce (other than	⊡ v∩	
6	Are you an unlawful user of any controlled subsi			•			
			-				
7	Have you ever been hospitalized or committed f If yes, attach proof that you have not abused a c	or treatment for the habitual i controlled substance or margi	use of a contro lana during the	led substa previous t	nce or manjuana wo years	7 ∐ NO	LIYES
	Have you ever been confined or committed to a as defined in Minn Stat 2538 02? If yes have you completed treatment?	treatment facility in Minnesol	a or elsewhere	as "chemi	aliy dependent"		
	. yes have yes completed acapholiti	-	-		-	C NU	L 165

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FIREARMS PERMIT STANDARDS 7416.9911

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9 Have you fied from any state to avoid prosecution for a crime or to avoid giving testimony in any criminal proceeding	257 🗆 NO 🗌	TES					
10 Are you a peace officer? If yes have you ever been informally admitted to a treatment facility pursuant to Minnesota Statute 253B 04 for	□no C] YES					
If yes, attach certificate from head of the facility discharging or provisionally discharging you from the facility		YES					
Have you ever been committed to a treatment facility in Minnesota or elsewhere as a "mentally lit" mentally retarded or "mentally ill and dangerous to the public' person as defined in Minnesota Statute § 2538 02? IN If yes attach proof you are no longer suffering from this disability							
12. Have you been confined in a treatment facility as a "mentally iit" mentally retarded", or "mentally iil and dangerous the public" person as defined in Mannesota Statule § 253B 02 or been found incompetent to stand trial or not guilty t reason of mental illness?		Tes					
13 Have you ever been discharged from the armed forces of the United States under dishonorable conditions?] YES					
14 Have you ever renounced your citizenship having been a citizen of the United States?	🗆 NO 🖸] YES					
15 1 am (check one) 🗋 American Citizen 🗌 Legal Resident 🗌 Allen (Attach							
I HEREBY AFFIRM THAT THE INFORMATION PROVIDED ON THIS APPLICATION/RECEIPT IS CORRECT PROSECUTION AND/OR VOIDING OF ANY PERMIT ISSUED HEREUNDER	UPON PENALT	YOF					
SIGNATURE OF APPLICANT DATE							
RESTRICTIONS							
The following restrictions apply to the possession of firearms, to transferce permits and reports of transf	er for handgun						
 semiautomatic military-style assault weapons, and permits to carry handguns. Must be at least 18 years old to acquire or possess a handgun or a semiautomatic military style assault weapons but up 							
at least 21 years old to acquire handguns from Ecensed dealers • Must not have been convicted of a crime of violence (as defined in Minnesota Statutes § 624 712 subdivision 5) in unless 10 years have elaged since your civil rights have been restored or your sentence has expired and during that convicted of any other crime of violence	Minnesota or else time you have no	awhen t beet					
convicted of any other crime of violence Must not have been convicted of lifth-degree assault as defined in Minnesota Statutes § 609 224 in Minnesota or elsewhe (1) within 3 years of a previous assault conviction under Minnesota Statutes § 609 221 to 609 224 or (2) where the assa household member unless 3 years have elspsed since the date of conviction and during that time you have not been co	re since August 1 ult victim was a fa nvicted of any oth	1992 amily c					
 Must not have been judicially committed to a treatment facility in Minnesota or elsewhere as mentally ill mentally relations. 							
dangerous to the public."							
 Must not have been atther convicted in Minnesota or elsewhere of unlawful use possession or sale of a controlled subtance (other that possession of a small amount of manjuna) or hospitalized or committed for treatment for the hobitual use of a controlled subtance or remanuana unless you possess a contrictel from a medical doctor or psychiatrist or effer satisfactory proof that you have not abused a controlled substance during the past two years. 							
 Must not have been confined or committed to a treatment facility in Minnesota or elsowhere as chemically dependent unless you have completed treatment 							
 Must not be a peace officer who has been informally admitted to a treatment facility for chemical dependency unless y from the head of the treatment facility discharging or provisionally discharging you from that facility Must not have been convicted in Minnesota or elsewhere of a crime punishable by impresonment for more than a y pertaining to entitust violations unleit inde practices restraints of trado or similar offenses relating to the some been restored or the conviction thas been participated expunded or sisted 	ear fother than of	ttonse					
unless your civil rights have been restored or the conviction has been pardoned expunged or set aside • Must not be fugitive from justice							
 Must not be a user of any contolled substance as defined in Chapter 152 of Minnesota Statutes Must not be an alien who is illegally or unlawfully in the United States 							
Must not have discharged from the armed forces of the United States under dishenorable conditions							
 Must not have renounced your United States citizenship Must not have been confined to a treatment facility in Minnesola or elsewhere as mentally ill mentally retarded or meni 	tally ill and dange	rous t					
the public of found incompetent to stand trial or not guilty by reason of montal illness unless you possess a contricate I psychiatrist licensed in Minnessot ar other satisfactory proof that you no longer suffer from this disability The following requirements. In addition to those satisfact above, also apply to permits to carry handguna	rom a medical do	xtor o					
 Must provide either a firearms safety cartificate recognized by the Department of Natural Resources evidence of succes of ability to use a firearm supervised by the chief of police or sheriff or other satisfactory proof of ability to use a pistol satisfactory 	istul completion of	a tes					
Must have an occupation or personal safety hazard requiring a permit to carry							
REVASED \$94							
RECEIPT							
HEREBY ACKNOWLEDGE ACCEPTANCE OF THIS APPLICATION							
Signature of person accepting application							
Date Time							
This receipt <u>does not</u> constitute a permit to acquire, possess or carry firearm	8						

Statutory Authority: *MS s 624 7151* History: *19 SR 1151* 7416.9920 [Repealed, 19 SR 1151] 7416.9930 [Repealed, 19 SR 1151]

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7416.9931 FIREARMS PERMIT STANDARDS

7416.9931 MINNESOTA UNIFORM HANDGUN APPLICATION/RECEIPT CARRY PERMIT FOR HANDGUN IN PUBLIC PLACE.

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		MINNESOTA UNIFORM HANDGUN APPLICATION/RECEIPT CARRY PERMIT FOR HANDGUN IN PUBLIC PLACE (TYPE OR PRINT ONLY)					
omitted pertinent in prohibited from pos authority The waiti	formation that person isessing a pistol unde	may be subject to ar section 624 713 the date that this	criminal prosec I in which even	ution The permit t the holder shal	to carry shall b return the part	e void at the tim mat within five (alsfied this application of e that the holder becomes 5) days to the application ont 1 x 1° color head-and
ļ				ES ADVISOR			
	ta Practices Act require a permit to purchase					a bandgun you a	are being asked to provide
private and/or cont eligibility to posses	idential data about you s a firearm and/or can	urself which will be y a handgun	used to check o	enminal histories	arrest records	and warrant info	rmation to determine your
being processed in error regarding old to other law enforce	nformation regarding er records The inform ement agencies	previous residence aton that you prov	e addresses (pas nde will be used l	it 10 years)" is op by the licensing a	tional, Howeve	r if provided ntw	sult in your application no nil reduce the possibility of ion and may be conveyed
I HAVE READ AN	UNDERSTAND THE	ABOVE DATA P	RACTICES ADV	/ISORY			
SIGNATURE						DATE	
	AUTHO	DRIZATION FO	R RELEASE	OF COMMITM	ENT INFORM	ATION	
authonze the relea possess a firearm completed and will	se of commitment info and/or carry a handg result in your applicati	rmation maintainei un You may refu	d by the Commis se to provide th	sioner of Human	Services which	will be used to o Id you refuse th	 you are being asked to letermine your eligibility to e investigation cannot be
assault weapon un	e commitment informa	§624 713 subdry	he information re ision 1 to the loc	elates to my eligit cal police authorit	ulity to possess y reviewing this	a handoup or se	 Commissioner of Humar imiautomatic military style the purpose of conducting
SIGNATURE						DATE	
NOTE This conseination on it if not	nt is subject to revoca previously revoked th	tion at any time e is authonzation w	xcept to the exte Il terminate upon	ent that the Com notification to th	missioner of Hu e applicant of th	man Services hi e denial or grant	as already taken action in of this application
NAME (LAST FIRST MIDDI	£ jrysr)				DATE OF BATH		HOME PHONE NUMBER
		I WAVE LIFED					
MAIDEN NAME OF APPLICA	BLE) OR OTHER NAMES YO						
WAIDEN NAME OF APPLIC			GIY		COUNTY	STATE	ZIP CODE
PRESENT RESIDENCE AD	RESS			14419 CO CO			ZIP CODE
PRESENT RESIDENCE AD	IRESS HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR		STATE	IP CODE
PRESENT RESIDENCE AD	RESS	WEIGHT	EYE COLOR	HAIR COLOR			1. ^p COOE
PRESENT RESIDENCE AD	IRESS HEIGHT	WEIGHT	EYE COLOR				<i>πP</i> COOE
PRESENT RESIDENCE AD	IRESS HEIGHT	WEIGHT	EYE COLOR				[2] ² CODE
PRESENT RESIDENCE AD		WEIGHT	EYE COLOR ATTOOS ETC)	F A HANDOUN	MN DRIVERS LICE		[2]P CCOE
PRESENT RESIDENCE AD	RESS HEIGHT COMMUNIERISTICS (NCUL COCUPATION OR PERSON	WEIGHT	EYE COLCA ATTICOS ETC) MARING CARRYING O	E (PAST 10 YE	MN DRIVERS LICE		
PRESENT RESIDENCE AD		WEIGHT	EYE COLCA ATTICOS ETC) MARING CARRYING O	F A HANDOUN	MN DRIVERS LICE		DP CODE
PRESENT RESIDENCE AD	RESS HEIGHT COMMUNIERISTICS (NCUL COCUPATION OR PERSON	WEIGHT	EYE COLCA ATTICOS ETC) MARING CARRYING O	E (PAST 10 YE	MN DRIVERS LICE		
PRESENT RESIDENCE AD	RESS HEIGHT COMMUNIERISTICS (NCUL COCUPATION OR PERSON	WEIGHT	EYE COLCA ATTICOS ETC) MARING CARRYING O	E (PAST 10 YE	MN DRIVERS LICE		
PRESENT RESIDENCE AD	RESS HEIGHT COMMUNIERISTICS (NCUL COCUPATION OR PERSON	WEIGHT	EYE COLCA ATTICOS ETC) MARING CARRYING O	E (PAST 10 YE	MN DRIVERS LICE		

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MINNESOTA RULES 1994 FIREARMS PERMIT STANDARDS 7416.9931

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1	either (1) been restored to your civil rights at least 10 years ago or (2) your sentence expired at least 10 years ago? If yes, complete the following information		□ YES
	CONVICTION DATE(S):		
	TOCATION OF CONVICTION (CITY COUNTY STATE)		
2	Have you been convicted after August 1 1992, of assault in the fifth degree under Minn Stat. 609 2247 If yes, was the assault committed within three years of a previous assault conviction under Minn Stat 609 221 to 609 224 OR was the assault votim a family or household member?		□ yes □ yes
	If yes, complete the following information		
	CONVICTION DATE(S): CRIME(S):		
	נסבאזיטא פר כאיאכיזוטא (פוזי כסטאנזי צוגוד)		
3	Have you been convicted of a crime punishable by imprisonment for a term exceeding one year regardless of what punishment was actually imposed?	0א 🗆	⊡ YES
ł	CONVICTION DATE(S):		
	נסכאזוטיו טי כטאויטרווטי נסנויזי בטעוויזי צואדע:		
4	Have you ever been pardoned for a crime of violence? If yes, complete the following information Participant Cruitice	0 и 🗆	□ yes
	LOCATION OF ORIZINUL CONVICTION (CITY COUNTY STATE)		
	Under the law of the junsdiction where you were convicted has your conviction been expunged, set aside or pardoned or have you had your civil rights restored? (Attach a copy of documentation establishing that the conviction has been expunged, set aside or pardoned or that you have had your civil rights restored)	ОИ	□ yes
5	Have you ever been convicted for the unlawful use possession, or sale of a controlled substance (other than conviction for possession of small amount of Manjuana as defined in Minn Stat 152 01 subd 16)?	□ NO	□ YES
6	Are you an unlawful user of any controlled substance as defined in Chapter 152, Minnesota Statutes?	ОиП	U YES
7	Have you ever been hospitalized or committed for treatment for the habitual use of a controlled substance or manjuana? If yes, attach proof that you have not abused a controlled substance or manjuana during the previous two years	סא⊡	□ yes
B	Have you ever been confined or committed to a treatment facility in Minnesota or elsewhere as "chemically dependent" as defined in Minn Stat 253B 02?	🗆 NO	□ yes
	If yes, have you completed treatment?		🗆 YES
9	Do you hold a firearms safety certrificate? (If yes attach copy thereof)	ОИ	
10	Have you satisfactorily completed a practical test of your ability to use and care for firearms as approved by this law enforcement agency? (If yes, attach proof of completion)	Пио	□ YES
11	Have you fied from any state to avoid prosecution for a crime or to avoid giving testimony in any criminal proceedings?		□ YES
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MINNESOTA RULES 1994 7416.9931 FIREARMS PERMIT STANDARDS

12. Are you a peace officer?		YES					
If yes, have you ever been informally admitted to a treatment facility pursuant to Minnesota Statute 253B 04 for chemical dependency?							
If yes attach certificate from head of the facility discharging or provisionally discharging you from the facility							
13. Have you ever been committed to a treatment lacility in Minnesota or elsewhere as a "mentally lil" "mentality retarded, or "mentality ill and dangerous to the public" person as defined in Minnesota Statute § 253B 02? If yes attach proof you are no longer suffering from this disability	Пио						
14 Have you been confined in a treatment facility as a "mentally ill", mentally retarded", or "mentally ill and dangerous to the public" person as defined in Minnesota Statute § 253B 02 or been found incompetent to stand trial or not guility by reason of mental illness?	סא □	□ yes					
15. Have you ever been discharged from the armed forces of the United States under dishonorable conditions?	Ои 🗌						
16 Have you ever renounced your citizenship having been a citizen of the United States?	□ №	🗆 YES					
17 Jam (check one) 🗌 American Citizen 🗌 Legal Resident 🗌 Alien (Attach copy	of docum	entation					
I HEREBY AFFIRM THAT THE INFORMATION PROVIDED ON THIS APPLICATION/RECEIPT IS CORRECT UP PROSECUTION AND/OR VOIDING OF ANY PERMIT ISSUED HEREUNDER	N PENA	LTY OF					
SIGNATURE OF APPLICANT DATE							
		-					
RESTRICTIONS							
The following restrictions apply to the possession of firearms, to transfere permits and reports of transfer i semiautomatic military-style assault weapons, and permits to carry handguns	or handg	una and					
 Must be at least 18 years old to acquire or possess a handgun or a semiautomatic military style assault weapons but under at least 21 years old to acquire handguns from licensed dealers 	federal lav	v must be					
 Must not have been convicted of a crime of violence (as defined in Minnesota Statutes § 624 712 subdivision 5) in Mini unless 10 years have elapsed since your civil rights have been restored or your sentence has expired and during that time convicted of any other crime of violence 	iesota or e you have	alsewhere not beer					
 Must not have been convicted of fifth-degree assault as defined in Minnesota Statutes § 609.224 in Minnesota or elsewhere si (1) within 3 years of a previous assault conviction under Minnesota Statutes § 609.221 to 609.224 or (2) where the assault vhousehold member unless 3 years have elapsed since the date of conviction and during that time you have not been convict degree assault. 	ctum was a	family or					
 Must not have been judically committed to a treatment facility in Minnesota or elsewhere as mentally ill mentally retarded or mentally ill and dangerous to the public." 							
• Must not have been either convicted in Minnesota or elsewhere of unlawful use possession or sale of a controlled substance (other than possession of a small amount of manjuana) or hospitalized or committed for treatment for the habitual use of a controlled substance or manjuana unless you possess a certificate from a medical doctor or psychiatrist or other substance/proof that you have not abused a controlled substance during the past two years							
 Must not have been contined or committed to a treatment facility in Minnesota or elsewhere as chemically dependent unless you have completed treatment 							
 Must not be a peace officer who has been informally admitted to a treatment facility for chemical dependency unless you promitive head of the treatment facility discharging or provisionally discharging you from that facility 	035858 B	contificate					
*• Must not have been convicted in Minnesola or elsewhere of a crime punishable by imprisonment for more than a year (pertaining to antitrust violations unfair trade practices restraints of trade or similar offenses relating to the regulation of unless your civil rights have been restored or the conviction has been pardoned expunged or set aside • Must not be fugitive from justice	other than business	offenses practices]					
 Must not be a user of any contolled substance as defined in Chapter 152 of Minnesota Statutes 							
Must not be an alien who is illegally or unlawfully in the United States							
 Must not have discharged from the armed forces of the United States under dishonorable conditions Must not have renounced your United States critizenship 							
 Must not have renounced your United States citizenship Must not have been confined to a treatment facity in Minnesola or olsewhore as mentally ill mentally retarded or mentality ill and dangerous to the public or lound incompetent to stand trial or not guilty by reason of mental illness unless you possess a certificate from a medical doctor or psychiabist licensed in Minnesola or other sabsfactory proof that you no longer suffer from this disability 							
The following requirements, in addition to those stated above, siso apply to permits to carry handguns Must provide either a finarms safety certificate recognized by the Department of Natural Resources evidence of successful of shifty to use a fineram supervised by the chief of polico or shortff or other satisfactory provide tablity to use a pistol safety 							
Must have an occupation or personal safety hazerd requiring a permit to carry							
REVISED 694							
· · · · · · · · · · · · · · · · · ·							
HEREBY ACKNOWLEDGE ACCEPTANCE OF THIS APPLICATION							
Signature of person accepting application							
Date Time							
This receipt <u>does not</u> constitute a permit to acquire, possess or carry lirearms							

Statutory Authority: MS s 624 7151 History: 19 SR 1151 .