



Cromwell Police Department



Pistol Permit Procedure - Step 1 of 2

- Obtain Cromwell Police Department Pistol Permit Packet
(Note: No person may apply for a temporary state permit within a 12-month period more than once and no temporary permit shall be issued to any person who has applied for a permit more than once within the preceding 12 months. [CGS 29-28])

ITEMS YOU MUST PROVIDE:

- ☐ Completely filled out and **notarized** Application. All four pages must be included. (Hint: On Page 1 – 60 Day Temporary State Pistol Permit MUST be checked)
 - ☐ Signed FBI Privacy Act Statement.
 - ☐ Signed Noncriminal Justice Applicant's Privacy Rights.
 - ☐ Pistol Safety Course certificate. Note: Certificates are valid for 2 Years beginning July 1, 2024.
 - ☐ Pistol Safety Course Affidavit (As of July 1, 2024)
 - ☐ Birth Certificate (US Passport is also acceptable).
 - ☐ Proof of Cromwell Residency – you must provide **two (2)** documents from the attached list of acceptable items.
 - ☐ **Pistol Permit Information Release (If you lived out of Town within the last 7 years)
 - ☐ **Fingerprint Log (if previously fingerprinted)
 - ☐ **Naturalization or immigration papers. Legal Alien Residents must provide Alien Registration number and 90-day proof of residency. Naturalized citizens require proof of citizenship.
 - ☐ **Ex-Military must provide your DD-214 papers.
- Submit all paperwork via email to PistolPermits@cromwellpd.com.

Retain all paperwork as you will need to submit **ORIGINALS at fingerprint appointment.**

****All original documents will be returned after they are photocopied. ****

- Wait for return email stating that your application has been received and the next steps for the process.

Questions/Inquiries - contact Lori Ouellette at PistolPermits@cromwellpd.com or Monday through Friday between 9:00 a.m. to 4:00 p.m. at 860-635-7851.
Email preferred. Please include a phone number in email.

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

NOTICE

Pursuant to C.G.S. §§ 29-28, 29-32, 29-36f 29-36l, and 18 U.S.C. § 922, *applications covered by these instructions will not be issued or be renewed, if:*

1. You have a **FELONY CONVICTION** in any jurisdiction.
2. You have a **MISDEMEANOR CONVICTION** in Connecticut for one of the following crimes in the preceding 20 years:
 - a. Criminally negligent homicide as specified under C.G.S. § 53a-58
 - b. Assault in the third degree as specified under C.G.S. § 53a-61
 - c. Assault of an elderly, blind, disabled, or pregnant person or a person with intellectual disability in the third degree as specified under C.G.S. § 53a-61a
 - d. Threatening in the second degree as specified under C.G.S. § 53a-62
 - e. Reckless endangerment in the first degree as specified under C.G.S. § 53a-63
 - f. Unlawful restraint in the second degree as specified under C.G.S. § 53a-96
 - g. Riot in the first degree as specified under C.G.S. § 53a-175
 - h. Riot in the second degree as specified under C.G.S. § 53a-176
 - i. Inciting to riot as specified under C.G.S. § 53a-178
 - j. Stalking in the second degree as specified under C.G.S. § 53a-181d
3. You have a **MISDEMEANOR CONVICTION** in Connecticut for illegal possession of controlled or hallucinogenic substances, as specified under C.G.S. § 21a-279 on or after 10/1/2015
4. You are an unlawful user of or addicted to any controlled substance (as defined in the Controlled Substances Act (21 U.S.C. 801, et. seq.).
5. You were **CONVICTED** of a **MISDEMEANOR CRIME of DOMESTIC VIOLENCE**.
This means an offense that (1) is a misdemeanor under federal or state law; and (2) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, or by a person with whom the victim shares a child in common, or by a person who is cohabiting with or who has cohabited with the victim or spouse, parent, or guardian, or by any person similarly situated to a spouse, parent or guardian of the victim.
6. You were discharged from custody within the preceding 20 years after having been found **NOT GUILTY OF A CRIME BY REASON OF MENTAL DISEASE OR DEFECT** pursuant to C.G.S. § 53a-13.
7. You were **CONFINED TO A HOSPITAL** for persons with psychiatric disabilities (C.G.S. § 17a-495) within the preceding sixty (60) months by order of a Probate Court.
8. You have been voluntarily admitted to a hospital for persons with psychiatric disabilities, within the preceding six (6) months for reasons other than solely for alcohol or drug dependence.
9. You are subject to a **RESTRAINING ORDER** 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.
10. You are the subject of a court issued risk warrant to seize firearms pursuant to C.G.S. § 29-38c(d).
11. You are an **ILLEGAL ALIEN** in the United States.
12. You are **UNDER the AGE of 21 years**.
13. You have renounced your United States citizenship.
14. You have been discharged from the Armed Forces under a dishonorable condition.
15. You are prohibited by federal law, under 18 U.S.C. 922 (g) or (n).

Please mail in your renewal or direct any questions regarding your status to DESPP Headquarters, Special Licensing and Firearms Unit, located at 1111 Country Club Road, Middletown, Connecticut 06457-2389 or by telephone at (860) 685-8290. Hours of operation are Monday through Friday 8:30 am – 4:15 pm. **Please note all locations will be closed on State and Federal holidays.** Troop locations may be closed during inclement weather.

Troop E – Montville I-395 N (between exits 6 & 9) Montville, CT 06382, telephone 860-848-6539 –
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.—**BY APPOINTMENT ONLY**

Troop G - Bridgeport, 149 Prospect Street, Bridgeport, Connecticut, 06604; telephone (203) 696-2532
Tuesday, Wednesday, Friday, and Saturday 8 am – 12 pm and 12:30- 3:45 pm; Thursday 11 am – 2 pm and 2:30 – 6:45 pm.—**BY APPOINTMENT ONLY**

Current schedules, hours and directions can be found at www.ct.gov/despp - click on Special Licensing and Firearms Unit link.

The Department of Emergency Services and Public Protection (DESPP) herein notifies the applicant that DESPP will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined in a hospital for persons with psychiatric disabilities within the preceding sixty (60) months by order of Probate Court, or if the applicant has been voluntarily admitted to a hospital for persons with psychiatric disabilities within the preceding six (6) months for reasons other than solely for alcohol or drug dependence. DESPP will use this information in order to fulfill its statutory obligations under Connecticut General Statutes Sections 29-28, 29-36f.



STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE



Special Licensing and Firearms Unit

PISTOL PERMIT/ELIGIBILITY CERTIFICATE APPLICATION

(Pursuant to C.G.S. §§ 29-28 et. seq., 29-36 et. seq., and 53a-217 et. seq.)

Before completing this application, it is suggested that you review the Connecticut General Statutes pertaining to firearms. These can be accessed on the Internet at www.cga.ct.gov or through your local library.

Type of Permit Requested:

Check Box:

- ☐ 60 Day Temporary State Pistol Permit
☐ Non-Resident State Pistol Permit
☐ Eligibility Certificate to Purchase Pistols or Revolvers
☐ Eligibility Certificate to Purchase Long Guns

Instructions:

Instructions for State Pistol Permits:	Instructions for Non-Resident State Pistol Permits:	Instructions for Eligibility Certificates to Purchase Pistols or Revolvers and/or Eligibility Certificates to Purchase Long Guns:
<p>1. Complete this form (DPS-799-C) and submit to appropriate local authority (local police, resident state trooper or first select person, as applicable) along with all of the following:</p> <ul style="list-style-type: none"> Firearms Safety & Use Course Certificate; \$70.00 fee, payable to the local authority; and Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.). <p>2. Fingerprints are required to process this application. Please contact your local law enforcement agency for further direction on the process for obtaining fingerprints.</p> <p>3. Upon approval, the local authority will issue a Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C), effective for 60 days.</p> <p>4. Within the 60 day period, go to a DESPP, Division of State Police, pistol permit location and submit the following:</p> <ul style="list-style-type: none"> The Temporary State Permit to Carry Pistols and Revolvers (DPS-11-C) issued by the local authority; A completed Application for State Permit to Carry Pistols and Revolvers (DPS-46-C); \$70.00 fee, payable to Treasurer, State of Connecticut; Proof you are legally and lawfully in the United States (e.g., certified copy of birth certificate, U.S. passport or documentation issued by I.C.E.); and Proof of valid state issued photo identification card. <p>5. Upon approval, your photograph will be taken at DESPP and you will be issued a state pistol permit.</p>	<p style="text-align: center;">**CALL DESPP FOR PACKET**</p> <p><i>You must hold a valid permit or license to carry a pistol or revolver issued by a recognized United States jurisdiction.</i></p>	<p style="text-align: center;">**CALL DESPP FOR PACKET**</p> <p><i>You must be 21 years of age to obtain a Pistol Eligibility Certificate. You must be 18 years of age to obtain a Long Gun Eligibility Certificate.</i></p>

For Department of Emergency Services and Public Protection (DESPP), Division of State Police, pistol permit locations, access www.ct.gov/despp and follow the link to the Special Licensing and Firearms Unit or call (860) 685-8290. Note: All payments must be made with separate checks.

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

Medical History:

Have you been confined in a hospital for mental illness in the past sixty (60) months by order of a Probate Court?

☐ NO ☐ YES If "YES," explain: (Attach additional sheet(s), if necessary)

Have you been discharged from custody within the past twenty years after having been found not guilty of a crime by reason of a mental disease or defect? ☐ NO ☐ YES

If "YES," explain: (Attach additional sheet(s), if necessary)

Have you been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence? ☐ NO ☐ YES

If "YES," explain: (Attach additional sheet(s), if necessary)

Notice: DESPP herein notifies the applicant that, pursuant to C.G.S. §§ 29-28 through 29-38b, DESPP will be notified by the Department of Mental Health and Addiction Services if the applicant has been confined to a hospital for psychiatric disabilities within the preceding sixty (60) months by order of Probate Court, or if the applicant has been voluntarily admitted to a hospital for mental illness within the past six (6) months for reasons other than solely for alcohol or drug dependence.

Criminal History:

Have you ever been ARRESTED for any crime, in any jurisdiction? ☐ NO ☐ YES If "YES," list all arrests, indicating charges, locations, dates of arrest and dispositions. (Attach additional sheet(s), if necessary)

Notice: You are **not** required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to C.G.S. §§46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. 46b-146), an adjudication as a youthful offender (C.G.S. 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon (C.G.S. 54-142a).

With regard to criminal history information arising from jurisdictions other than the State of Connecticut: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to the law of the other jurisdiction. Additionally, you are not required to disclose the existence of an arrest arising from another jurisdiction if you are permitted under the law of that jurisdiction to swear under oath that you have never been arrested.

Have you ever been CONVICTED under the laws of this state, federal law or the laws of another jurisdiction?

☐ NO ☐ YES If "YES," list all convictions, include charges, location, date of arrest, and disposition. (Attach additional sheet(s), if necessary)

Are you currently on probation, parole, work release, in an alcohol and/or drug treatment program or other pre-trial diversionary program or currently released on personal recognizance, a written promise to appear or a bail bond for a pending court case? ☐ NO ☐ YES If "YES," explain. (Attach additional sheet(s), if necessary)

Within the past five (5) years, have you been the subject of a Protective Order or Restraining Order issued by a court in a case involving the use, attempted use or threatened use of physical force against another person, regardless of the outcome or result of any related criminal case? ☐ NO ☐ YES

If "YES," which court issued the order?

Military History:

Were you ever a member of the Armed Forces of the United States? ☐ NO ☐ YES (If yes, please include a copy of your DD-214)

Were you ever discharged from the Armed Forces of the United States with a less than Honorable Discharge? ☐ NO ☐ YES

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

Proof of Training:

**Attach a copy of the letter or certificate attesting that you have completed a course in the safety and use of pistols and revolvers or long guns (as appropriate, depending upon which permit or certificate you are requesting), signed by the instructor of the course.*

Instructor: (Check applicable box)

- ☐ National Rifle Association
☐ Department of Energy and Environmental Protection (DEEP)
☐ Other: _____

State Instructor's Name and ID Number: _____

Declaration:

I understand that any false statement herein, which I do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function, is punishable by law (See CGS § 53a-157b). I further understand that any statement in this application that is determined to be false or inaccurate shall constitute grounds for the denial of such application. If approved before the facts are known, such approval shall be void if based on a false or inaccurate statement. My signature below attests to the accuracy, completeness and to the truth of all information supplied on this application:

I declare, under the penalties of false statement, that the answers to the above are true and correct.

Date _____

Signed _____

STATE OF _____

Print Name _____

COUNTY OF _____

Subscribed and sworn to before me this _____ day of _____ 20____

Name:
Notary Public
My Commission Expires:
Commissioner of Superior Court

NOTICE: Appeal Process for Permits

In the event that your application for pistol permit or eligibility certificate is denied or revoked, you may notify the Board of Firearm Permit Examiners, at 20 Trinity St., 5th Floor, Hartford, CT 06106. Telephone: (860)256-2977 OR (860) 256-2947, in writing, within ninety (90) days, in order to begin your appeal process. At a hearing before the Board, you may request that your application be reconsidered or that your permit or eligibility certificate be reinstated.

For Official Use Only:

Application Received:

□□/□□/□□□□
Month/Day/Year

FBI Sent: ☐ No ☐ Yes
FBI Reply: ☐ No ☐ Yes
ICE Response: ☐ No ☐ Yes
DMHAS: ☐ No ☐ Yes
SPBI: ☐ No ☐ Yes
Number: _____

Application Status:

☐ Approved ☐ Denied

(Signature and title of issuing authority)

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).

Requesting Entity: CROMWELL POLICE DEPARTMENT

FBI Privacy Act Statement

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

Note: This privacy act statement is located on the back of the FD-258 fingerprint card.

SIGNATURE	DATE
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This document must be retained by the Entity.

Noncriminal Justice Applicant's Privacy Rights

Requesting Entity: CROMWELL POLICE DEPARTMENT

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. **All notices must be provided to you in writing.**¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later), by the agency that will receive your criminal history results, when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

Updated 11/6/2019

If you need additional information or assistance, please contact:

Connecticut Records: Department of Emergency Services and Public Protection State Police Bureau of Identification (SPBI) 1111 Country Club Road Middletown, CT 06457 860-685-8480	Out-of-State Records: Agency of Record OR FBI CJIS Division-Summary Request 1000 Custer Hollow Road Clarksburg, West Virginia 26306
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SIGNATURE	DATE
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This document must be retained by the Entity.

¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

FINGERPRINT LOG

I, _____, DOB: _____ certify that I have been previously fingerprinted as follows:

Date Fingerprinted:	Agency:	Reason for being Fingerprinted:

Signature: _____ Date: _____

Notice: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to C.G.S. 46b-146, 54-76o, or 54-142a.

If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. 46b-146), an adjudication as a youthful offender (C.G.S. 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon (C.G.S. 54-142a).

With regard to criminal history information arising from jurisdictions other than the State of Connecticut: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to the law of the other jurisdiction. Additionally, you are not required to disclose the existence of an arrest arising from another jurisdiction if you are permitted under the law of that jurisdiction to swear under oath that you have never been arrested.



Cromwell Police Department **Acceptable Proof of Cromwell Residency**



Residency Documents

You must provide two (2) different forms of acceptable residency documents when applying. When using a mailing address that is a post office (PO) box or general delivery, you must provide an actual place of residence on your application (A Cromwell License or ID will be required as part of the application process, so it will not be considered as a proof of address.) The address on the residency documents must match the residence address on your application.

All documents with *** require to be dated within 60 days and only one of each is acceptable.

- Rental or lease agreement with the signatures of the owner/landlord and the tenant/resident.
- School document.
- Deed or title to residential real property.
- Insurance documents, including medical, dental, vision, life, home, rental, and vehicle.
- Internal Revenue Service or CT tax return from current year.
- Connecticut title or registration for a vehicle or vessel.
- Change of Address Confirmation by the United States (U.S.) Postal Service (Form CNL 107).
- Documents issued by a government within the U.S. or the U.S. government institution (military ID for example or federal work ID).
- Property tax bill or statement.
- Court document that lists the applicant as a resident of Connecticut.
- Mortgage bill. ***
- Home utility bill (including cellular phone). ***
- Medical document. ***
- Employment document. (pay stub) ***
- Record of a financial institution. ***



CROMWELL POLICE

Frederick Sifodaskalakís

Chief of Police



PISTOL PERMIT INFORMATION RELEASE

Applicant Name:	Date of Birth:
Current Street Address::	
Cromwell, CT 06416	

I, (name) _____, hereby authorize the Cromwell Police Department to release all police related reports which include my name for the purpose of the required pistol permit background check. My previous residence was at the following address(es):

(Street Address, City/ Town, State, Zip)

(Street Address, City/ Town, State, Zip)

(Street Address, City/ Town, State, Zip)

(Street Address, City/ Town, State, Zip)

Signature: _____ Date: _____

5 WEST STREET, CROMWELL, CT 06416

Tel: 860-635-2256 | www.CromwellPD.com | Fax: 860-632-8248