

TOWN OF EXETER
OFFICE OF THE TOWN CLERK

APPLICATION FOR LICENSE TO CARRY A
CONCEALABLE WEAPON

DATE: _____ PERMIT NUMBER: _____

NAME: _____
 First Middle Last

ADDRESS: _____
 Street Number and Name City or Town State and Zip
 (No PO Boxes accepted)

TELEPHONE NUMBER: _____
 Home Business Other

SOCIAL SECURITY NO. _____ OCCUPATION _____

EMPLOYED BY: _____
 Employer's Name

 Employer's Street Name & Number City or Town State & Zip

DETAIL JOB DESCRIPTION: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____
HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

ARE YOU A CITIZEN OF THE UNITED STATES? _____ HOW LONG? _____
(If you are not a citizen of the United States, copies of both sides of your Alien Registration Card must be included with this application.)

LIST ALL ADDRESSES FOR THE LAST THREE YEARS, INCLUDING DATES AND
LOCATIONS: _____

HAVE YOU EVER BEEN ARRESTED? _____ IF SO, GIVE DETAILS: _____

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HAVE YOU EVER BEEN UNDER GUARDIANSHIP OR CONFINED OR TREATED FOR MENTAL ILLNESS? _____ IF SO, GIVE DETAILS _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ IF SO, GIVE DETAILS: _____

HAVE YOU EVER PLED *NOLO CONTENDRE* TO ANY CHARGE OR VIOLATION? _____ IF SO, GIVE DETAILS: _____

ARE YOU UNDER INDICTMENT IN ANY COURT FOR A CRIME PUNISHABLE BY IMPRISONMENT EXCEEDING ONE YEAR? _____ IF SO, GIVE DETAILS AND DATES: _____

HAVE YOU APPLIED FOR A PERMIT TO CARRY A CONCEALED PISTOL OR REVOLVER FROM THE ATTORNEY GENERAL OR A LOCAL CITY OR TOWN IN RHODE ISLAND: _____ IF SO, GIVE CITY OR TOWN _____ IF SO, IS THE PERMIT CURRENTLY ACTIVE: _____ EXPIRED _____ DENIED _____ REVOKED _____
(If you hold an expired permit, enclose photocopy, Notary signed and dated, attesting copies are true)

HAVE YOU EVER APPLIED FOR A PISTOL PERMIT TO CARRY A HANDGUN IN ANOTHER STATE? Yes: _____ No: _____ IF YES, STATE AND CITY: _____

WERE YOU EVER DENIED? _____ IF SO, GIVE DETAILS: _____

ATTACH PHOTOCOPIES OF ANY AND ALL OUT-OF-STATE PERMITS OR LICENSES.

HAVE YOU EVER HAD A LEGAL NAME CHANGE? _____ IF YES, PLEASE STATE FORMER NAME: _____

PLEASE LIST ANY AND ALL NICKNAMES OR ALIASES USED BY YOU: _____

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TO THE TOWN SERGEANT OF THE TOWN OF EXETER, RHODE ISLAND:

THIS IS TO INFORM YOU THAT _____
 APPLICANT'S NAME PRINTED OR TYPED

IS APPLYING FOR A PISTOL PERMIT TO CARRY A CONCEALED PISTOL OR REVOLVER
 IN THE STATE OF RHODE ISLAND. PURSUANT TO LAW, YOU MUST FORWARD YOUR
 RECOMMENDATION FOR APPROVAL OR DENIAL TO THE TOWN CLERK UPON
 COMPLETION OF YOUR REVIEW OF THE ATTACHED APPLICATION AND
 DOCUMENTATION IN SUPPORT.

Receipt Acknowledged:

 Exeter Town Sergeant Date

On a separate sheet of paper or letterhead, TYPE details and specific reasons for your need
 for a Rhode Island permit (ONLY TYPED LETTERS WILL BE ACCEPTED).

Two (2) types of positive identification must be submitted. Examples: (1) Birth Certificate;
 (2) Rhode Island or state driver's license; (3) Rhode Island identification card. Photocopies
 of any two (2) of the above, signed and dated by a Notary Public attesting as being true
 copies, will be accepted. Passport and other positive identification will also be accepted.

THREE (3) REFERENCES ARE REQUIRED:

| Name | Address/City/State/Zip | Area Code / Tel No. | Years Known |
|------|------------------------|---------------------|-------------|
|------|------------------------|---------------------|-------------|

| Name | Address/City/State/Zip | Area Code / Tel No. | Years Known |
|------|------------------------|---------------------|-------------|
|------|------------------------|---------------------|-------------|

| Name | Address/City/State/Zip | Area Code / Tel No. | Years Known |
|------|------------------------|---------------------|-------------|
|------|------------------------|---------------------|-------------|

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NOTE: THE RI COMBAT COURSE IS FOR LAW ENFORCEMENT PERSONNEL ONLY. ALL OTHERS MUST QUALIFY IN ACCORDANCE WITH 11-47-15

WEAPON QUALIFICATION SCORE: _____ CALIBER OF WEAPON: _____

AMY-L: _____ SCORE: _____ R.I. COMBAT: _____ SCORE: _____

SIGNATURE OF N.R.A. INSTRUCTOR OR POLICE RANGE OFFICER

DATE

PRINTED NAME & TELEPHONE NUMBER OF N.R.A. INSTRUCTOR OR
POLICE RANGE OFFICER

DATE

N.R.A. NUMBER OR POLICE DEPARTMENT NAME

AFFIDAVIT

I CERTIFY THAT I HAVE READ AND I AM FAMILIAR WITH THE PROVISIONS OF 11-47-1 TO 11-47-55, INCLUSIVE, OF THE GENERAL LAWS OF RHODE ISLAND, 1956, AS AMENDED, AND THAT I AM AWARE OF THE PENALTIES FOR VIOLATIONS OF THE PROVISIONS OF THE CITED SECTIONS. I ALSO SWEAR, UPON PAINS OF PERJURY, THAT I HAVE READ THE "Instructions for License to Carry A Concealable Weapon" WHICH ACCOMPANIES THIS APPLICATION, THAT I UNDERSTAND ITS CONTENT, AND THAT ALL STATEMENTS IN THIS APPLICATION AND THE MATERIALS SUBMITTED HEREUNDER ARE TRUE, GENUINE, AND ACCURATE. I FURTHER UNDERSTAND THAT ANY ALTERATION OF THIS APPLICATION OR ANY RESULTING PERMIT IS JUST CAUSE FOR REJECTION AND/OR REVOCATION THEREOF. **THE CALIBER OF THE FIREARM THAT IS CARRIED MAY NOT EXCEED THE CALIBER LISTED ON ANY GUN PERMIT ISSUED.**

APPLICANT'S SIGNATURE

BEFORE A NOTARY PUBLIC, subscribed and sworn to before me in _____,
Rhode Island, this _____ day of _____, 20____.

Notary Public signature

Notary Public (name printed)

My Commission expires on: _____
Month Year State

TOWN OF EXETER

INSTRUCTIONS
LICENSE TO CARRY A CONCEALABLE WEAPON

1. Complete three (3) copies of the application in full.
The applications can be handwritten or typewritten.
Do not sign the affidavit on Page 4.
You will attest to the truth of your application before the Town Clerk who will notarize your signature when you submit your application.
(Note: Incomplete applications will not be accepted.)
2. Obtain two (2), 1" x 1," recent photos, taken without headgear or glasses.
The photos must be clear and from the shoulders up.
Print your name on the back of each photo.
3. Contact a NRA Certified Pistol Instructor for Proof of Qualification.
After qualification is met, have the Instructor complete the top portion of Page 4 of the application.
Obtain two (2) copies of the Instructor's NRA/FBI Firearms Instructor's Certificate.
4. Be prepared to bring two (2) types of positive identification at the time of submission of your application.
These will be photocopied and attested to be true copies by the Town Clerk.

5. Obtain one (1) RIBCI Background Report at the Rhode Island Office of the Attorney General, 4 Howard Avenue, Cranston, Rhode Island:
 - A. The report must not be more than 30 days old at the time of submission of your application.
 - B. As of the date of these instructions, the Attorney General's fee for a BCI Background Report is \$5.00.
 - C. Forms of payment include: personal checks and money orders (payable to "BCI"); and credit cards (Visa, MasterCard, American Express, and Discover; a processing fee may apply). Cash is **not** accepted.
 - D. It is suggested that you call the Attorney General's Office (401) 274-4400 for hours and whether an appointment is necessary, if you have any questions regarding the background report, or wish to confirm the fee and payment thereof. The Attorney General's number is (401) 274-4400.

6. Obtain two (2) Fingerprint Cards:
 - A. One fingerprint card will be submitted with your application.
 - B. The second fingerprint card you will submit with your application for a Federal Background Check. (See Instruction No. 8.)
 - C. You can obtain your fingerprint cards one of two ways. (See D and E below.)
 - D. You can seek to obtain your fingerprint cards at the Rhode Island Attorney General's Office at 4 Howard Avenue, Cranston, Rhode Island.

The fee, at the time of these instructions, for a fingerprint card is \$15.00. (You will need **two**.)

Forms of payment include: personal checks and money orders (payable to "BCI"); and credit cards (Visa, MasterCard, American Express, and Discover; a processing fee may apply). Cash is **not** accepted.

Before going to the Attorney General's Office, it is **strongly** suggested that you call the Attorney General's Office, (401) 274-4400, for hours, to inquire whether an **appointment** is necessary, for **procedure** on how to obtain fingerprint cards, if you have any questions regarding the background report, or you wish to confirm the fee and payment thereof.

- E. **Or** you can seek to obtain your fingerprint cards at TRP Associates, 601 Jefferson Boulevard, Warwick, Rhode Island, (877) 885-1511. You will need to call to schedule an appointment. (Be advised: The number of available appointments per week is limited.)

As of the date of these instructions, TRP's fee for **each** fingerprint card is \$40.00 each. (You will need **two**.)

Forms of payment include: Debit or Credit Card preferred. Cash is generally not accepted. However, if an applicant does not have a debit or credit card, TRP will accept cash.

- F. You are given two ways to obtain your fingerprint cards because at times during the COVID-19 Pandemic, this service at the Attorney General's Office has been non-existent or limited. The State Police will not process fingerprint cards for the Town of Exeter for concealed carry permit applications, nor will other city or town police departments.

7. Obtain a Federal Background Report through the FBI at **www.fbi.gov**. Once on the website, take these steps to print the application:

- A. Services
- B. Identity History Summary Checks
- C. Application Form
- D. Request Form
- E. Download
- F. Print

(Note: With your application you will send an \$18.00 fee and a fingerprint card. You are required to have the report mailed to your attention care of the Exeter Town Clerk, 675 Ten Rod Road, Exeter, RI 02822.)

- 8A. If the permit is to be used in connection with your employment, a typed letter of explanation by your employer or an authorized officer of your employer on your employer's letterhead must be included with your application.
- 8B. If the permit is not in connection with your employment, a typed letter must be submitted by you with your application stating the reasons why a permit is needed.

Do not sign the letter. You will sign the letter in the presence of the Town Clerk who will notarize your signature.

- 9. Retired Police Officers applying under RIGL Section 11-47-18 must submit with the application a Letter of Verification from the Chief of Police of the department from which they retired stating that they have completed twenty (20) years of good service.
- 10. Once you have completed all the above, including mailing your application to the FBI, contact the Town Clerk at (401) 294-3891 to make an appointment to submit your application and accompanying documentation. The Town Sergeant will be present to sign the application (Page 3) and accept a copy.

(Note: The Town Sergeant is obliged by law to review the application and forward his recommendation for approval or denial to the Town Clerk before your application can be acted upon.)

Following the Town Sergeant's review of your complete application, you will be notified of approval or denial of the permit.

(Note: The law allows a maximum of 90 days for processing of an application. The FBI report takes up to three months to reach the Town Clerk (sometimes more; sometimes less).

If your application is approved, the Town Clerk will contact you to schedule an appointment for issuance of the permit. The Town Sergeant will be present. An application fee in the amount of \$40.00, cash, check (payable to the "Town of Exeter"), or credit card (a 2% + \$1.00 fee will apply) will be required before the permit is issued.

Denial of your application will be sent to you in writing.

If it has been some time since you submitted your application, do not call the Town Clerk or Town Sergeant. Your application is being processed. The delay may be because your Federal Background check has not been received. If it is not received after three months, you will be contacted to contact them.

The application and accompanying documentation become part of the records of the Town of Exeter and will not be returned whether the permit is approved or denied.

All permits expire four years from the date of issue. It is not the responsibility or obligation of the Town of Exeter to notify a permit holder that his or her permit is expiring.