

City of Marlborough POLICE DEPARTMENT

355 Bolton St
Marlborough, Ma. 01752
Phone: 508-485-1212 Fax: 508-624-6949



MARK F. LEONARD
Chief of Police

FIREARMS LICENSING APPLICATION

FIREARMS LICENSING OFFICERS:

Sgt. Richard Oldroyd
508-485-1212 ext.: 36965

Renewals Only: Maeve Moran
508-485-1212 ext.: 36989

Applicants for a Firearm Identification Card (FID) are required to complete a Massachusetts Firearms Safety Course or Hunter A Safety Program approved by the Massachusetts State Police in accordance with Chap. 140 Sec. 131P. Persons applying for a License to Carry Firearms must complete and approved Massachusetts LTC Basic handgun Safety Course. Out of State courses do not meet the criteria for Massachusetts Firearms Licensing. A safety course is not required for a restricted FID card (Chemical Propellant).

It is strongly recommended that you read the application completely prior to signing up and paying for a safety course or applying for a firearms license. Pay particular attention to questions 1 through 15 page 2 of the application, if there are any questions concerning your eligibility based on these questions, feel free to ask the licensing officers prior to applying. The application fee covers the cost of processing the application and is non-refundable if you are denied the license.

APPLICATION FEES:

FID	\$100.
LTC	\$100.
RESTRICTED FID (Chemical Propellant Only)	\$25.
FID CARD Under 18 years old	\$25.

A check or money order made payable to the City of Marlborough,

CASH WILL NOT BE ACCEPTED

Firearms Identification Card – Basic Safety Course:

NRA Basic Rifle and Basic Shotgun Course	FID-001
Sig Arms Academy Firearms Orientation Course	FID-003
Smith & Wesson Academy Massachusetts FID Safety Course	FID-004
Basic Hunter Safety Course, offered by the Massachusetts Environmental Police	

License to Carry – Basic Safety Course

Mass Chiefs of Police Assoc. Basic Handgun Safety Course	LTC-001
NRA Basic Pistol Course	LTC-002
NRA personal Protection Course	LTC-003
Sig Arms Academy Handgun Orientation Course	LTC-004
Smith & Wesson Academy Massachusetts Carry Permit Course	LTC-005
MCJTC Recruit Firearms Training Course	LTC-006
NRA Home Safety Course	LTC-007
Worcester PD Firearms Responsibility and Safety Course	LTC-008
Mass. Sheriffs Association Firearms safety & Handling Course	LTC-009
BFSI Handgun Safety Course	LTC-010
MSP Recruit Firearms	LTC-011
Sig Arms Concealed Carry Pistol Course	LTC-012

Once you have completed the appropriate safety course, contact one of the licensing officers and set up an appointment. A safety course is not required for applicants renewing a license issued prior to June 1, 1998

The Marlborough Police department utilizes the Massachusetts Instant Record Check System (MIRCS) to issue permits. Therefore, you are no longer required to bring photographs with you to the appointment.

On the day of your appointment please bring the following:

1. A completed Application Form
2. A check or money order made payable to the City of Marlborough for the appropriate fee
3. A Valid Massachusetts Drivers License
4. The required Safety Course Certificates (If Applicable)

**ADDENDUM TO ALL APPLICATIONS FOR FIREARMS LICENSES AND
PERMITS ISSUED PURSUANT TO M.G.L. CHAP. 140**

Applicants Name: _____

Processing Officer: _____

APPLICANTS PLEASE ANSWER THE FOLLOWING QUESTIONS;

Are you currently the subject of any order issued pursuant to either Chap. 208 or 209A of the Massachusetts General Laws? _____

If yes please explain when and where:

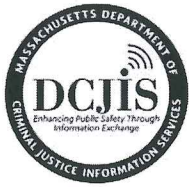
**WARNING TO PROHIBITED PERSONS FEDERAL FIREARMS CONTROL ACT
OF 1968, AS AMENDED**

The federal Firearms Control Act of 1968, as amended, prohibits the sale, possession or receipt of any type of firearm or ammunition by the prohibited persons, including convicted felon, mental incompetents, unlawful drug users, persons dishonorable discharged from the Armed Forces, fugitives from justice, aliens illegal or unlawful in the U.S., persons who renounced their U.S. citizenship and others. If you are a prohibited person, you must comply with all federal requirements prior to purchasing, possessing, or receiving firearms or ammunition. Contact the U.S. Bureau of Alcohol, Tobacco and Firearms (ATF) for further information.

**Failure to comply with the federal law could result in prosecution and/or the seizure of
firearms and ammunition**

I acknowledge being notified of the requirements of the Federal Firearms Control Act of 1968, as amended.

Signature of Applicant: _____ Date: _____



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY
Department of Criminal Justice Information Services
200 Arlington Street, Suite 2200, Chelsea, MA 02150
mass.gov/cjis | TTY: 617-660-4606

PD USE ONLY
FTN: _____
LIC #: _____

You must submit this form to your local police department

MASSACHUSETTS RESIDENT LTC/FID/MACHINE GUN APPLICATION
FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY
FIREARMS OR LICENSE TO POSSESS A MACHINE GUN (M.G.L. c. 140, §§ 129B, 131)

CHECK ONE:

- ☐ New Applicant*
☐ Renewal - Most Recent License to Carry/FID Number: _____

*NOTE: If application is for a first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached, unless exempt by statute. If this is a renewal application, a lost/stolen firearms affidavit must be submitted.

LICENSE APPLICATION TYPE (Check Only One):

- ☐ Firearms Identification Card - Restricted (self-defense spray)
☐ Firearms Identification Card
☐ License to Carry
☐ License to Possess a Machine Gun
☐ Gun Club License (Only the Colonel of the State Police can issue a club license)

EXCEPT FOR SIGNATURE, PRINT OR TYPE ALL REQUESTED INFORMATION:

Last Name		First Name		Middle Name	Suffix
Residential Address		City	State	Zip Code	Telephone Number
Mailing Address		City	State	Zip Code	Telephone Number
Date of Birth		Place of Birth (City, State, Country)			
Mother's First Name		Mother's Maiden Name	Father's First Name	Father's Last Name	
Height	Weight	Build	Complexion	Hair Color	Eye Color
Occupation			Social Security Number (Optional)		Drivers License Number
Employed By			Business Address		
City/Town		State	Zip	Telephone Number	

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1. Are you a citizen of the United States? ☐ YES ☐ NO
- If lawful permanent resident alien, give
green card number and resident date
- | | | |
|--|-------------------|-----------------------|
| | Green Card Number | Resident Since (date) |
|--|-------------------|-----------------------|
-
- If naturalized, give date, place
and naturalization number
- | | | | |
|--|------|-------|--------------------|
| | Date | Place | Naturalization No. |
|--|------|-------|--------------------|
-
2. Have you ever renounced your U.S. citizenship? ☐ YES ☐ NO
3. What is your age? _____ (You must be 21 to apply for a LTC, 18 to apply for a FID card, or 14 to 17 with submission of a certificate of parent or guardian granting permission to apply for a FID card or FID card – Restricted).
4. Have you ever been arrested or appeared in court as a defendant for any criminal offense? ☐ YES ☐ NO
5. Are you the subject of any pending criminal charges? ☐ YES ☐ NO
6. Have you ever been convicted of a felony? ☐ YES ☐ NO
7. Have you ever been convicted of the unlawful use, possession, or sale of controlled substances as defined in M.G.L. c. 94C, § 1? ☐ YES ☐ NO
8. Have you ever been convicted of a violent crime or a crime of domestic violence? ☐ YES ☐ NO
9. Have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child in any state or federal jurisdiction? ☐ YES ☐ NO
10. Are you now, or have you ever been the subject of a restraining order issued pursuant to M.G.L. c. 209A, or a similar order issued by another jurisdiction? ☐ YES ☐ NO
11. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction? ☐ YES ☐ NO
12. Have you ever been committed to any hospital or institution for mental illness, or alcohol or substance abuse? ☐ YES ☐ NO
13. Has any firearms license issued under the laws of any state or territory ever been suspended, revoked, or denied? ☐ YES ☐ NO
14. Have you been discharged from the armed forces of the United States under dishonorable conditions? ☐ YES ☐ NO
15. Have you been the subject of an order of the probate court appointing a guardian or conservator? ☐ YES ☐ NO

If you answered "YES" to any of the questions 2-15, give details which must include dates, circumstances and location; use a separate sheet of paper if necessary.

Have you ever used or been known by another name?

☐ YES ☐ NO

If "YES", provide name and explain: _____

Other than Massachusetts, in what state(s), territory(ies), or jurisdiction(s) have you lived?

☐ NONE

Have you ever held a firearms license in any other state, territory or jurisdiction?

☐ YES ☐ NO

If "YES", when, where, and license number? _____

List the name and addresses of two references (as required by your licensing authority)

1.

Last Name

First Name

Address

City/Town

State

Zip

2.

Last Name

First Name

Address

City/Town

State

Zip

Reason(s) for requesting the issuance of a card or license:

☐ Target & Hunting

☐ Sporting

☐ Employment

☐ Unrestricted (use lines below to indicate the reason(s) you are requesting an unrestricted LTC; use a separate sheet of paper if necessary)

WARNING Any person who knowingly files an application containing false information shall be punished by a fine of not less than \$500 nor more than \$1,000 or by imprisonment for not less than 6 months nor more than 2 years in a house of correction, or by both such fine and imprisonment (M.G.L. c.140, §§ 129B(8), 131(h)).

I declare the above facts are true and complete to the best of my knowledge and belief and I understand that any false answer(s) will be just cause for denial or revocation of my license to carry firearms. I understand that filing an application that contains false information is a criminal offense.

Signed under the penalties of perjury this _____

day

day of _____

month

year

Signature of Applicant: _____