



West Greenwich Police Department

280 Victory Highway
West Greenwich, Rhode Island 02817
(401) 397-7191

Application for a permit to carry a concealed weapon

Dear Applicant:

By applying to the West Greenwich Police Department for a permit to carry a concealed pistol or revolver, you are exercising your right under Rhode Island General Law, Section 11-47-11. It is the statute which gives the West Greenwich Police Department the right and responsibility to administer this program in accordance with the law. It is intended as a service to the people of the Town of West Greenwich.

It is important to remember that a permit to carry a concealed pistol or revolver does not authorize you to use the firearm. Such usage of a handgun is regulated by other provisions of Rhode Island law. Please carefully read the enclosed policy regarding the issuance of the pistol or revolver permit. It is intended to serve as a guideline to aid you in understanding the authority and responsibility of the West Greenwich Police Department.

Also contained in this application are the Rhode Island General Laws relating to weapons, known as the Firearms Act. Before you are granted a permit to carry a pistol or revolver, you must acknowledge that you are familiar with the provisions of the Act.

This application package does not include Federal Laws pertaining to firearms. You must observe both Federal and Rhode Island laws. A Federal Law is administered by Federal Agencies. For information relative to Federal regulations of firearms, you may contact the Bureau of Alcohol, Tobacco, and Firearms.

The application itself must be filled out completely and truthfully. It is a crime to knowingly give false information to obtain a permit to carry a pistol or revolver. Please read the instructions carefully and note that first time and renewal applicants must supply all information being requested by the West Greenwich Police Department at the time of application.

The submission of the application for a permit to carry a concealed pistol or revolver is the beginning of a process of review by members of the West Greenwich Police Department, which may include a personal interview and which culminates in a recommendation of grant or denial. Should your application be denied, you will be advised by mail stating the reason for the denial. If you wish to appeal this decision, you may appeal to court.

A successful applicant for a permit to carry a pistol or revolver will be notified by mail to respond personally to the West Greenwich Police Department to obtain the permit. Please exercise your privilege to carry a concealed pistol or revolver in the State of Rhode Island responsibly, properly, and safely.

Sincerely,

Richard N Ramsay
Chief of Police
West Greenwich, Rhode Island

Pistol Permit Policy

INTRODUCTION

Pursuant to Rhode Island General Laws, Section 11-47-11, the West Greenwich Police Department has the authority to issue a license or permit to carry a concealed pistol or revolver to any person 21 years of age or over upon a proper showing of need, or has a good reason to fear an injury to his or her person or property, or has any other proper reason for carrying a pistol or revolver, and that he or she is a suitable person to be so licensed. The West Greenwich Police Department will exercise its discretion consistent with Section 11-47-11.

Pursuant to Rhode Island General Laws Section 11-47-15, the applicant must also qualify to obtain a permit. The right to carry a loaded, concealed firearm in public is different from the right to purchase or possess a handgun in one's own home or business.

The West Greenwich Police Department does not discriminate in the issuance of a pistol permit on the grounds of race, sex, national origin, or any other reason prohibited by law.

PROCEDURE

An applicant for a pistol permit must submit a written application with a recent photograph, two types of positive identification, and a full set of fingerprints on the FBI fingerprint applicant card to the West Greenwich Police Department, 280 Victory Highway West Greenwich, R.I. 02817. The West Greenwich Police Department then checks the applicant's background with state, local and federal law enforcement databases. The West Greenwich Police Department may also check court records and other sources for pending criminal cases, restraining orders and/or discrepancies in the applicant's background, including prior history of mental illness. This check includes speaking with references, neighbors and employers they deem appropriate.

The West Greenwich Police Department will not issue a pistol permit to any applicant who is prohibited from possessing or carrying a firearm under any state or Federal Law (e.g. 18 U.S.C. Section 922 (g)) or pursuant to any court order.

If this initial check does not disqualify the applicant from obtaining a pistol permit, the West Greenwich Police Department may conduct a personal interview to clarify information provided on the application.

CRITERIA FOR ISSUING A CONCEALED
PISTOL OR REVOLVER PERMIT

Rhode Island General Law, 11-47-11(a) establishes the following criteria for the issuance of a permit to carry a concealed pistol or revolver upon his/her person:

1. A person must have a bona fide residence or place of business within the Town of West Greenwich and be 21 years of age or over;
2. or, Any person 21 years of age or over, having a bona fide residence within the United States and license or permit to carry a pistol or revolver concealed upon his or her person issued by the authorities of any other state or subdivision of the United States;
3. or, If it appears that the applicant who meets the criteria in #1 above, has a good reason to fear an injury to his or her person or property;
4. or, Having met the criteria in #1 above, has any other proper reason to so be licensed and shall be a suitable person to be so licensed.
5. A person prohibited from having a firearm by any state or Federal Law, or court order is not eligible to obtain a permit to carry a concealed weapon.

PROPER SHOWING OF NEED

In considering each individual application for a pistol permit, the West Greenwich Police Department must determine whether or not the applicant has demonstrated a proper showing of need to carry a loaded firearm in public, and consider the individual's demonstration of skill and responsibility to safely carry and use a firearm in compliance with all State, Federal and local laws.

While there cannot be any set formula or criteria to limit or restrict the West Greenwich Police Department's discretion to issue or deny a pistol permit, the West Greenwich Police Department considers the following factors in assessing an applicant's proper showing of need:

1. Has the applicant demonstrated a specific or particular risk to life, limb or property?
2. Has the applicant demonstrated the skill, training, and ability to properly use a concealed weapon in accordance with Rhode Island Laws?
3. Has the applicant presented a plan to properly secure the firearm so that it does not fall into unauthorized hands?
4. Does past unlawful, dangerous or violent conduct of the applicant justify denial at the West Greenwich Police Department's discretion even if it is not sufficient to disqualify the applicant as a matter of law from possessing a firearm?
5. Has the applicant been issued a protective order pursuant to Chapter 15-5, Chapter 15-15, or Chapter 8-8.1 of the General Laws?
6. Any and all other factors deemed lawful and appropriate by the Town of West Greenwich to demonstrate that the applicant is or is not a person suitable to possess a loaded firearm in public.

After assessing the above factors, the West Greenwich Police Department in its sole discretion shall grant or deny the pistol permit. In certain cases the Town of West Greenwich may issue a pistol permit with restrictions in lieu of a denial.

RESPONSIBILITIES

Approved holders should maintain, use and store their firearm(s) in a responsible manner. All permit holders are required to inform the West Greenwich Police Department, as well as the police department where the theft or loss occurred, within 24 hours of becoming aware of the loss or theft of a weapon. If you do not report a loss or theft timely, your permit may be suspended.

INSTRUCTIONS FOR A LICENCE TO CARRY A CONCEALED WEAPON

NO APPLICATIONS WILL BE CONSIDERED UNLESS THE FOLLOWING HAVE BEEN ACCOMPLISHED

1. This official application form must be filled out completely by the applicant. Please PRINT or TYPE application or **IT WILL BE RETURNED**.
2. The application must be **NOTARIZED**.
3. Enclose two (1" x 1") pictures of the applicant taken without headgear or glasses. This photo must be a clear colored picture of the head and face. Please PRINT applicant's name of the back of each picture. NO laminated photos will be accepted.
4. Proof of qualification before a certified weapons instructor, i.e. NRA instructor or police range instructor, must be supplied along with a copy of the NRA/FBI firearms instructor's certification.
5. Two types of positive identification must be submitted, photocopied, signed, and dated by a notary public attesting to be true copies.
6. All new pistol permits issued from this department must have a full set of applicant's fingerprints submitted on an **FBI FINGERPRINT APPLICANT CARD** FD-258 Rev. 12-29-82)) included with the application. Fingerprint card must be signed by the applicant. This is not necessary for renewal applications.
7. If the permit is to be used for employment, a **TYPED** letter of explanation must be submitted on your employer's letterhead and included with the application.
8. If the permit is not for employment, a typed letter must be submitted by the applicant stating the reasons why a permit is needed on a full-time basis. All letters must be dated. We will not accept a photocopy of any signature.
9. Retired police officers applying under Section 11-47-18 must submit a letter of verification from the Chief of Police of the department from which they retired, stating that they have completed 20 years of GOOD service.
10. A forty dollar (\$40.00) **CHECK OR MONEY ORDER** must be submitted with your application and made out to the West Greenwich Police Department. This fee covers the administrative costs involved in processing the application and is non-refundable.
11. Applicant will be notified by mail of approval or denial of permit. Telephone inquiries will not be accepted. If approved, applicant must appear in person to pickup permit. This application, fingerprint card, and photos become part of the records of the West Greenwich Police Department and will NOT be returned.
12. All permits will expire **FOUR (4) YEARS** from the date of issue. Also, the renewal of your permit is your obligation. No notification of expiration of the permit will be sent to you. Allow a maximum of 120 DAYS for processing of your application.

(If necessary, please submit a separate sheet)

ATTACH PHOTOCOPY OF OUT-OF-STATE PERMIT OR LICENSE

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

PLEASE LIST NICKNAMES OR ALIAS USED BY YOU _____

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: Ex. (1) Birth Certificate (2) Rhode Island or State Driver's License (3) Rhode Island Identification Card

A PHOTOCOPY 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) LETTERS OF REFERENCE ARE REQUIRED

Name	Address/City/State/Zip	Tel #	Yrs Known
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Name	Address/City/State/Zip	Tel #	Yrs Known
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Name	Address/City/State/Zip	Tel#	Yrs Known
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**NOTE: THE RI COMBAT COURSE IS FOR LAW ENFORCEMENT PERSONNEL ONLY
ALL OTHERS MUST QUALIFY IN ACCORDANCE TO SECTION 11-47-15**

WEAPON QUALIFICATION SCORE: CAL. OF WEAPON _____

AMY-L _____ SCORE _____ RI 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

AFFIDAVIT

I CERTIFY THAT I HAVE READ AND I AM FAMILIAR WITH THE PROVISIONS OF SECTION 11-47-1 TO 11-47-62, 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 FURTHER UNDERSTAND THAT ANY ALTERATION OF THIS PERMIT IS JUST CAUSE FOR REVOCATION.

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 – Printed Name

MY COMMISSION EXPIRES ON _____
Month Year State

**FACTS TO DETERMINE FEAR OR INJURY
TO PERSON OR PROPERTY**

The following factors will be considered when determining an application for a concealed weapon permit. These factors will be considered once the applicant has demonstrated that he/she meets the criteria.

1. Injury to Person or Property:

- a. Explain the circumstances and extent of the threat or injury to your person or threat or extent of damage to your property:

- b. Has the applicant filed a report with any law enforcement agency indicating that his/her person or property has been threatened or damaged? _____ .

What agency has the report been filed with? _____

- c. What was the result? _____

- d. Has the applicant received a restraining order from any court? _____

2. Is the applicant presently, or has/she been the subject of a restraining order from any court?

3. How will the carrying of a concealed pistol or revolver, on his/her person, mitigate the threat to you or your property? _____

(If necessary, please submit a separate sheet)

**PERSONS PROHIBITED FROM CARRYING
OR POSSESSING ANY FIREARM**

Pursuant to Rhode Island General Law 11-47-6 certain persons are prohibited from purchasing, carrying, or possessing any firearm. These persons include, but are not limited to:

1. A person under guardianship.
2. A person under treatment by virtue of being a mental incompetent.
3. A person who has been adjudicated or is under treatment or confinement as a drug addict.
4. A person under treatment or confined as a habitual drunkard.
5. A person convicted of a crime of violence.

Do any of the prohibitions to receiving a license to carry a weapon apply to you?

Yes _____

No _____

If yes, please explain: _____

(If necessary, please submit a separate sheet)

**FACTS TO BE USED IN DETERMINING
WHETHER THE APPLICANT IS A PROPER
PERSON TO RECEIVE A PERMIT TO CARRY
A CONCEALED PISTOL OR REVOLVER**

1. Have you ever been arrested? _____

If so, note date of arrest(s) and give details: _____

2. Have you ever refused to take a breathalyzer test? _____

If so, give details including the name of the law enforcement agency involved _____

3. Have you ever applied for a permit to carry a concealed pistol or revolver in another State or from the Rhode Island Attorney General, or a local city/town in Rhode Island? _____

If yes, state city, town or State or jurisdiction _____

Were you denied? _____ If so, give reason: _____

(If necessary, please submit a separate sheet)