STATE OF ALABAMA PISTOL LICENSE APPLICATION

LAST NAME (write above line) | **FIRST NAME** | **MIDDLE NAME**

STREET ADDRESS | **CITY** | **STATE** Alabama | **ZIP**

PHONE NUMBER ( ) - | **YEARS LIVED IN BLOUNT COUNTY** | **DATE OF BIRTH** / /

PLACE OF BIRTH (STATE) | **RACE** | **SEX** | **HEIGHT** | **WEIGHT**

HAIR COLOR | **EYE COLOR** Al. | **SOCIAL SECURITY NUMBER**

DRIVERS LICENSE # | **STATE** | **OCCUPATION** | **EMPLOYER**

WORK ADDRESS | **WORK #** | **LENGTH OF EMPLOYMENT**

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES ( ) NO ( )

I AM A CITIZEN OF THE UNITED STATES YES ( ) NO ( )

HAVE YOU EVER BEEN CONVICTED OF A CRIME OF VIOLENCE INVOLVING THE USE OF A HANDGUN, ILLEGAL DISTRIBUTION OF A CONTROLLED SUBSTANCE, OR ANY CRIME THAT WOULD CONSTITUTE A FELONY? YES ( ) NO ( )

HAVE YOU BEEN CONVICTED OF ANY ALCOHOL RELATED OFFENCSE IN THE PAST THREE (3) YEARS? YES ( ) NO ( )

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES ( ) NO ( )

HAVE YOU EVER BEEN ADJUDGED MENTALLY DEFECTIVE OR COMMITTED TO A MENTAL INSTITUTION? YES ( ) NO ( )

HAVE YOU PURCHASED A HAND GUN IN THE PAST 90 DAYS? YES ( ) NO ( )

I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT AND I AM AWARE THAT I AM SUBJECT TO PROSECUTION IF I ANSWERED UNTRUTHFULLY.

SIGNATURE | **DATE**

Make check payable to: Loyd Arrington in the amount of $20.00
Include a copy of your driver's license.
Mail to: Blount County Sheriff's Office
225 Industrial Park Road
Oneonta, Alabama 35121