



The Commonwealth of Massachusetts  
**Criminal History Systems Board**  
 Firearms Record Bureau

FTN: \_\_\_\_\_  
 LIC #: \_\_\_\_\_

**Application**  
 FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR  
 LICENSE TO CARRY FIREARMS OR LICENSE TO POSSESS A MACHINE GUN  
 (MGL C.140, s.129B AND s.131)

**Please Check One**

\_\_\_\_ New Applicant  
 \_\_\_\_ Renewal - Most Recent License to Carry/FID Number: \_\_\_\_\_  
 Issued from Which City/Town? \_\_\_\_\_ MA Expiration Date: \_\_\_\_\_

\*NOTE: If application is for first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached to this application.

**Please Check the Type of License for Which You are Applying**  
 (Please Check Only One)

- \_\_\_\_ Firearms Identification Card - Restricted (mace and pepper spray)
- \_\_\_\_ Firearms Identification Card
- \_\_\_\_ Class B License to Carry - Non-Large Capacity
- \_\_\_\_ Class A License to Carry - Large Capacity
- \_\_\_\_ License to Possess a Machine Gun
- \_\_\_\_ Check if a Class A Gun Club License \*NOTE: 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

\_\_\_\_  
 Gun Club Address (If Applicable) City State Zip Code Telephone Number

\_\_\_\_  
 Date of Birth Place of Birth

\_\_\_\_  
 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

**Please Answer the Following Questions Completely and Accurately**

1. Are you a citizen of the United States? \_\_\_\_\_  
If naturalized give date, place and naturalization number  

	Date	Place	Naturalization No.
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2. Have you ever used or been known by another name? \_\_\_\_\_  
If yes, provide name and explain: \_\_\_\_\_  
\_\_\_\_\_
  
3. What is your age? \*You must be 21 years of age to apply for a License To Carry Firearms, 18 years of age to apply for a Firearms Identification Card, 15 years of age but less than 18 years of age with submission of a certificate of parent or guardian granting permission to apply for a Firearms Identification Card. \_\_\_\_\_
  
4. Have you ever been convicted of a felony? \_\_\_\_\_
  
5. Have you ever been convicted of the unlawful use, possession, or sale of narcotic or harmful drugs as defined in M.G.L. c. 94C sec. 1? \_\_\_\_\_
  
6. Have you ever been convicted of a crime punishable by incarceration by more than one (1) year? \_\_\_\_\_
  
7. In any state or federal jurisdiction have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child for the commission of (a) a felony; (b) a misdemeanor punishable by imprisonment for more than 2 years; (c) a violent crime as defined in MGL C140.s.121; (d) a violation of any law regulating the use, possession, ownership, sale, transfer, rental, receipt or transportation of weapons or ammunition for which a term of imprisonment may be imposed; or (e) a violation of any law regulating the use, possession or sale of controlled substances as defined in section 1 of MGL 94C? \_\_\_\_\_
  
8. Have you ever been confined to any hospital or institution for mental illness? \_\_\_\_\_
  
9. Are you or have you ever been under treatment for or confinement for drug addiction or habitual drunkenness? \_\_\_\_\_
  
10. Have you ever appeared in any court as a defendant for any criminal offense (excluding non-criminal traffic offenses)? \_\_\_\_\_
  
11. Are you now under any charge(s) for any offense(s) against the law? \_\_\_\_\_
  
12. Are you now or have you ever been the subject of a M.G.L. C209A restraining order or involved in a domestic violence charge? \_\_\_\_\_
  
13. Has any License to Carry Firearms, Permit to Possess Firearms, or Firearms Identification Card issued under the laws of any state or territory ever been suspended, revoked, or denied? \_\_\_\_\_
  
14. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction? \_\_\_\_\_

**If You Answered "YES" to any of the Questions 4-14, Give Details Which Must Include Dates, Circumstances and Location**

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Other than Massachusetts, in what state, territory or jurisdiction have you resided? \_\_\_\_\_

Have you ever held a License to Carry in any other state, territory or jurisdiction? \_\_\_\_\_

If "YES", when, where and license number? \_\_\_\_\_

**List the Name and Addresses of Two References**

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: \_\_\_\_\_

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**\*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 (MGL c.140, §§ 129B(8) and 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.

Signed under the penalties of perjury this \_\_\_\_\_ day of \_\_\_\_\_ month \_\_\_\_\_ year

Signature of Applicant: \_\_\_\_\_