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## APPLICATION FOR FIREARM LICENSE

House Form 1032 (11/23)
OFFICE OF THE INSPECTOR GENERAL
Pursuant to HCC § 6-3-3(d)

**PURPOSE OF FORM**: Any person who wishes to possess a firearm on House of Commons property must apply for a firearm license issued by the Inspector General.

a firearm license issued by the Ins	spector General.				
Full Name	Are You a Member of the House?  ☐ Yes ☐ No				
Do any of the following apply to you?  - Have a mental illness - Below the age of 21 - Above the age of 85  - Yes - No  IF YES, STOP. YOU ARE PROHIBITED FROM POSSESSING A FIREARM ON HOUSE PROPERTY.	<ul> <li>Are you aware, understand, and agree to abide by the following regulations: <ul> <li>Firearms must be in a locked compartment in the garage or a locked motor vehicle.</li> <li>Concealing carry is prohibited.</li> <li>Certain types of firearms are prohibited.</li> <li>Each firearm must be registered with the Inspector General.</li> <li>If you have a mental illness, below 21, or above 85 are prohibited from possessing a firearm.</li> <li>If you do not have an active license, you are prohibited from possessing a firearm.</li> <li>Your license may be revoked at any time.</li> <li>Background checks may be conducted as warranted.</li> <li>You must carry your license at all times and present it upon demand of an official of the House.</li> </ul> </li> <li>Yes</li> </ul>				
Reason/Need for Firearm	2.100				
Attach a color photograph taken within the last six (6) months on photo paper.  Ensure that your entire face is in the photo.  Have no objects blocking your face (hats, sunglasses, etc.).  No smiling.  No distortion or edits.  No excessive lighting or shadows.  No busy or distracting backgrounds.					
I attest, under penalties of perjury, that the information on this application is true to the best of my knowledge. I understand that if my application is conditionally approved, I will have to have a background check conducted and I will bear the cost of said background check.					
Signature	 Date				
DO NOT WRITE BELOW THIS LINE					

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Α	R	Date Issued:	Date Exp:	License No.: