



KLAMATH COUNTY SHERIFF'S OFFICE

Sheriff Frank Skrah

3300 Vandenberg Road, Klamath Falls, OR 97603
Phone (541) 883-5130 - Fax (541) 883-4271

APPLICATION FOR LICENSE TO CARRY A CONCEALED HANDGUN APPOINTMENTS ARE REQUIRED. DO NOT SEND PAYMENT WITH APPLICATION.

PRINT FULL LEGAL NAME _____
First Middle Last ALL other names Used

CIRCLE APPROPRIATE CATEGORY: NEW / RENEWAL / ADDRESS CHANGE / TRANSFER / NAME CHANGE / DUPLICATE

DRIVER'S LICENSE OR ID CARD MUST REFLECT YOUR CURRENT RESIDENTIAL ADDRESS.

Drivers License #: _____ State _____ Expiration Date: _____ Age _____ Sex _____

Date of Birth _____ Height _____ Weight: _____ Eye Color: _____ Hair Color: _____

Social Security Number _____ (Disclosure of your social security number is voluntary. Solicitation of the number is authorized under ORS 166.420. It will be used only as a means of identification.)

Current **RESIDENTIAL** Street Address: _____ Mailing Address (if different): _____

Numbers and Street name How long at address? P.O. Box

City State Zip Code City State Zip Code

Home Phone Number _____ Work Phone Number: _____

E-MAIL ADDRESS FOR SHERIFF'S OFFICE UPDATES (KEPT CONFIDENTIAL): _____

Indicate **STATE of birth** (or foreign country): _____ Race: _____

ATTENTION

Oregon law prohibits the issuance of a concealed handgun license to anyone with a felony conviction, a misdemeanor conviction within the last four years or anyone on pretrial release. Oregon law allows for the denial of a concealed handgun license if the Sheriff determines you are a danger based upon a past pattern of unlawful violence or threats of unlawful violence. Federal law (18 USC 922) prohibits issuance of a license to anyone who has **ever** been convicted of a misdemeanor crime of domestic violence. Federal law prohibits anyone who is subject to a court restraining or stalking order relating to domestic violence – to purchase and possess firearms and ammunition or engage in activities involving firearms. In addition, 18 USC 922 prohibits anyone who has renounced their United States citizenship, anyone who has been dishonorably discharged from the United States Armed Services, anyone who is an illegal alien and anyone who is an unlawful user of controlled substances from purchasing or possessing firearms.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT / PLEASE CONTINUE TO PAGE 2

*******To be filled in by Sheriff's Office Personnel*******
*****OFFICE USE ONLY *****OFFICE USE ONLY*****

Date Issued: _____ Approved By: _____ Amount Paid _____

OS _____ Date of Appointment _____

OR/SID# _____ Expiration Date _____

FBI # _____ - Q - D - L - N - Doc - OJIN - PPDS

PROOF OF IDENTIFICATION: (Two pieces of current identification are required, one of which must bear a photograph of the applicant. Type of identification and number on identification to be filled in by Sheriff's Office.)

ID #1 Type _____ Number: _____ ID #2 Type _____ Number _____

COMPETENCY -(To be filled in by Sheriff's Office) Instructor _____ NRA# _____

You are required to answer the following questions to provide sufficient information to complete a full background check. Failure to answer any question will result in your application being denied as incomplete. Making a false statement in this application may result in prosecution for a misdemeanor and will result in an automatic denial of your application.

True False I am a citizen of the United States. (If you were not born in the U.S., please refer to page 5 for details.) If I am **NOT** a U.S. citizen, I am a legal resident alien who can document continuous residency in Klamath County for at least six months **and have declared in writing to the Immigration and Naturalization Service my intention to become a citizen and can present proof of the written declaration to the Sheriff at the time of this application.**

True False - I am at least 21 years of age.

True False Not Applicable - I have been discharged from the jurisdiction of the juvenile court for more than four years, if while I was a minor, I was found to be within the jurisdiction of the juvenile court for having committed an act which, if committed by an adult, would constitute a felony or a misdemeanor involving violence, as defined in ORS 166.470.

True False - I have **NEVER** been convicted of a felony. This includes being found guilty of a felony by reason of insanity under ORS 161.295, in the State of Oregon or elsewhere. (See page 3 for more details.)

True False - I have **NOT** been convicted of a misdemeanor within the last four years from the date of this application. This includes being found guilty of a misdemeanor by reason of insanity under ORS 161.295 in the State of Oregon or elsewhere. (See page 3 for more details.)

True False - I have **NEVER** been convicted of a misdemeanor crime of domestic violence, as defined in the Gun Control Act of 1968.

True False - There are no outstanding warrants for my arrest **AND** I am not free on any form of pre-trial release.

True False - I have **NOT** been committed to the Mental Health and Developmental Disabilities Services Division under ORS 426.130, nor have I been found mentally ill and been prohibited from possessing a firearm because of mental illness. For those previous criminal or mental health conditions that do apply to me, I have been granted relief from the disability under ORS 166.274 or 18 U.S.C. 925(c). Proof of relief must be attached to this application.

True False - I meet the requirements of ORS 166.291 (f) (A) to (G) of competency with a handgun, **AND** I know I must bring documentation to my appointment or my application will not be approved. (See page 5 for more details.)

I understand that I will be fingerprinted (new applicants only) and photographed (all applicants).

RESIDENCY REQUIREMENTS, Select one:

I have a current Oregon driver's license showing a residence address in the county.

I am registered to vote in Klamath County, and I have a precinct memorandum card showing a residence address in the county.

I have documentation showing that I currently own or lease real property in the county.

I have documentation showing that I filed an Oregon tax return for the most recent tax year showing a residence address in the county.

I currently live in a contiguous state and am applying as an out of state applicant; I have included a compelling statement letter.

ADDRESSES - List resident addresses for the past three years:

LIST ALL STATES LIVED IN AS AN ADULT (18 YRS AND OLDER)

1. Have you ever been dishonorably discharged from the United States Armed Forces?
Yes No If yes, when _____
2. Have you ever renounced your United States citizenship?
Yes No If yes, when _____
3. Have you ever been convicted of an offense (including a violation or infraction) involving controlled substances (including but not limited to marijuana, ecstasy, heroin, cocaine, LSD, peyote, or methamphetamine)?
Yes No If yes, when and where? _____
4. Have you ever been in a court-ordered diversion program related to substance abuse charge (including violations and infractions)?
Yes No If yes, when and where? _____
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5. Do you currently use controlled substances such as marijuana, cocaine, methamphetamine, LSD, or ecstasy?
Yes No (If no, skip to question 6)
- 5a. If you answered yes to question 5, what controlled substances do you use? _____
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- 5b. If you answered yes to question 5, how would you describe your usage?
- Infrequent** (less than 4 times during the past 12 months)
 - Occasional** (4 to 12 times during the past 12 months)
 - Frequent** (at least 12, but less than 24 times during the past 12 months)
 - Regular** (once a week or more)
 - Daily** (one or more uses per day)
- 5c. If you answered yes to question 5, approximately how long have you been using controlled substances?
- Less than 3 Months**
 - 3 to 6 Months**
 - 6 Months to 1 Year**
 - More than 1 Year**
- 5d. If you answered yes to question 5, is your use of controlled substances authorized by a medical doctor?
Yes No
- 5e. If you answered yes to question 5, do you have a prescription authorizing the use of controlled substances?
Yes No
6. Are you subject to any type of restraining or stalking order issued by any court?
Yes No
7. If you are subject to a restraining or stalking order, please provide information about the order: _____
-
8. Have you EVER been convicted of a misdemeanor crime of domestic violence?
Yes No If yes, when? _____

9. Have you even been required to register as a sex offender in any state?

Yes No

9a. If you answered Yes to question 9, what state required you to register? _____

9b. Is the requirement to register as a sex offender still in effect? Explain _____

10. Do you currently possess or own a firearm that is in working order?

Yes No - If yes, who manufactured the firearm? (I.e. Glock, Ruger, Winchester, Remington)_____

REFERENCES (ONLY REQUIRED FOR NEW APPLICANTS)

List two character references who are not related to the applicant and not residing at applicant's address.

1. Name and complete mailing address: _____

_____ Phone: _____

2. Name and complete mailing address: _____

_____ Phone: _____

CAUTION: Possession of a concealed handgun license does not authorize you to carry a firearm in any federal building, on secured airport areas or in any courthouse where the presiding judge has posted notice of such prohibition. The Klamath County Courthouse and court rooms are posted with this prohibition. If you are apprehended with a weapon on these premises your concealed handgun license may be seized and returned to the Sheriff, and you may be arrested and charged with a crime.

I have read and understand this application. All information submitted is correct. I further understand that making false statements on this application is a misdemeanor and I am subject to prosecution and automatic denial or revocation. **All payments are non-refundable.**

Yes No - I AM REQUESTING THAT MY APPLICATION AND INFORMATION BE MAINTAINED AS CONFIDENTIAL, AND NOT BE RELEASED TO THE PUBLIC.

Yes No - I AM APPLYING FOR A CHL AS A PERSONAL SAFETY MEASURE, AND DO NOT WANT ANY INFORMATION ABOUT MY APPLICATION OR CHL STATUS RELEASED TO THE PUBLIC.

Signature of Applicant: _____ **Date Signed:** _____

If your address changes at any time while you have a Concealed Handgun License, notify the Concealed Handgun Unit within 30 days of the change of address to obtain a new license. There is a \$15.00 fee to issue the new license with the updated address. ORS 166.291(5)(C).

FEES:

New Concealed Handgun License (4 years)	\$65.00 – Check, Money order, or Cash accepted at the Sheriff's Klamath Falls location. Only Check or Money Order accepted at the Gilchrist location. \$50.00 is for the permit and \$15.00 is for the processing of the fingerprints.
Renewal for Concealed Handgun License	\$50.00 – Check, Money order or Cash.
Lost Concealed Handgun License or Change of Address	\$15.00 – Check, Money order or Cash.

DO NOT REPEAT COMPETENCY FOR RENEWALS

You must be able to document compliance of ORS 166.291 (f) by one of the methods provided by law as follows:

- (A) Completion of any hunter education or hunter safety course approved by the State Department of Fish and wildlife or a similar agency of another state if handgun safety was a component of the course.
- (B) Completion of any NRA firearms safety or training course if handgun safety was a component of the course.
- (C) Completion of any firearms safety or training course or class available to the general public offered by law enforcement, community college or private or public institution or organization or firearms training school utilizing instructors certified by the NRA or a law enforcement agency if handgun safety was a component of the course.
- (D) Completion of any law enforcement firearms safety or training course or class offered for security guards, investigators, reserve law enforcement officers or any other law enforcement officers if handgun safety was a component of the course.
- (E) Presents evidence of equivalent experience with a handgun through participation in organized shooting competition or military service. To present proper documentation through the military service, please bring your DD214. **Your DD214 MUST indicate training/qualification with a handgun, sidearm or pistol.** Should your DD214 indicate only "small arms qualification" it does not qualify as handgun training. In this case, you will need to take a handgun safety course to meet this requirement. Sorry, there are not exceptions allowed by law.
- (F) Is licensed or has been licensed to carry a firearm in this state, **unless the license has been revoked.**
- (G) Completion of any firearms training or safety course or class conducted by a firearms instructor certified by a law enforcement agency or the NRA if handgun safety was a component of the course.

Attention all concealed handgun license holders:

You **must** carry your valid concealed handgun license with you whenever you carry a concealed handgun. Failure of a person who carries a concealed handgun also to carry a concealed handgun license is prima facie evidence that the person does not have such a license. It is the responsibility of the individual license holder to be aware of the expiration date of their license and notify the Sheriff's Office.

ORS 166.295 (2) If a licensee changes residence, the licensee shall report the change of address and the Sheriff shall issue a new license as a duplication for a change of address. The license shall expire upon the same date as would the original.

United States Citizenship Requirements

Applicants who were not born in the United States but who have become naturalized U.S. citizens, or who were born in foreign countries as U.S. citizens, must present proof of citizenship at the time of appointment (note - do not mail them; bring them to your appointment.) . A work permit or a legal resident alien card does **not** meet this requirement. Methods that can prove your citizenship status include a U.S. Passport, a certificate of citizenship, an FFS240 (Foreign Service Document) issued at birth, a U.S. Birth Certificate or your original naturalized citizenship certificate. **No photocopies accepted.**

New applicants, transfers, and those renewing licenses must provide this proof.