State Of South Dakota Application to Carry Concealed Pistol

Regular ☐ Regular Renewal ☐ Enhanced New ☐ Restricted Enhanced ☐ Enhanced Renewal ☐ Rec:_____

_____ _____ _____
Last Name First Name Middle Name

_____ _____ _____ _____
Physical Address City State Zip

_____ _____ _____ _____
Mailing Address City State Zip

____/____/____ _____ _____-___-_____ _____
Date Of Birth Place of Birth (City State) SSN Occupation

_____ ☐ I am a US Citizen _____
Driver's License/ID Number ☐ I am not a US Citizen Alien/Admission # (Non US citizens)

_____ _____/_____ _____ _____ _____ _____
Weight (lbs) Height (Ft/In) Eye Color Hair Color Race Length of Residency in Brkgs CO.

Indicate the following:		Yes	No
1	Have you ever pled guilty to, nolo contendere to, or been convicted of a felony or crime of violence?		
2	Are you under indictment or information for a crime punishable by imprisonment for a term exceeding one year?		
3	Are you a fugitive from justice, including active misdemeanor or felony criminal warrants?		
4	Are you habitually in an intoxicated or drugged condition, or been arrested for **ANY** alcohol, weapons or drug violations in the last 5 years? (please circle one if applicable)		
5	Have you ever been adjudicated as mentally defective or found a danger to yourself or others. (please circle one if applicable)		
6	Have you ever received a Dishonorable Discharge from the military?		
7	Have you ever renounced your United States citizenship?		
8	Are you currently subject of a Protection or Restraining Order for Domestic Violence?		
9	Have you ever been convicted of a misdemeanor crime of Domestic Violence?		
10	Are you an unlawful user of, or addicted to, marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance? ***NOTICE:*** The use or possession of marijuana remains unlawful under Federal Law regardless of whether it has been legalized or decriminalized for medicinal or recreation purposes in the state where you reside. ***WARNING: IT IS A FEDERAL CRIME TO BE IN POSSESSION OF A FIREARM IF YOU ARE A MEDICAL MARIJUANA CARD HOLDER. 18 USC 922(g)(3)***		
11	Have you ever been denied the purchase of a firearm. If yes, please explain below and include a date and location:		
12	Have you ever been given a delay in the purchasing of a firearm? If yes, please explain below and include a date(s) and location(s):		
13	Have you ever been denied a concealed weapons permit or had your permit revoked or suspended? If so, please explain below and include a date(s) and location(s):		

I certify that I am the applicant described and that the above information is true and correct. I further certify that I have never pled guilty to, nolo contendere to, or been convicted of a crime of violence. I declare and affirm under the penalties of perjury that this application has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

_____ _____ _____

Applicant's Signature **Date** **Phone Number**