

PLEASE READ PRIOR TO COMPLETING

REQUIREMENTS FOR THE

PROVISIONAL CONCEALED WEAPON PERMIT

1. YOU MUST **FIRST** COMPLETE THE REQUIRED SAFETY COURSE.
2. PROPERLY FILL OUT THE APPLICATION, BUT **DO NOT** SIGN AND DATE IT UNTIL IN FRONT OF A NOTARY PUBLIC.
3. HAVE A VALID WEST VIRGINIA DRIVERS LICENSE OR STATE ISSUED ID AND BE A RESIDENT OF MONONGALIA COUNTY. IF YOU ARE A WEST VIRGINIA RESIDENT AND DO NOT HAVE A MONONGALIA COUNTY ADDRESS YOU CANNOT APPLY WITHIN THIS COUNTY. YOU MUST APPLY WITHIN THE COUNTY YOU RESIDE IN. HOWEVER, IF YOU HAVE RECENTLY MOVED TO MONONGALIA COUNTY AND YET TO HAVE CHANGED YOUR ADDRESS, YOU MUST GO TO THE WEST VIRGINIA DMV AND DO THIS FIRST, BEFORE APPLYING.
4. THE APPLICATION PROCESSING FEE IS \$25.00 **CASH OR MONEY ORDER ONLY**, WE DO NOT ACCEPT CHECKS OR CREDIT CARDS. IF YOU ARE APPROVED, THE FEE TO PICK UP YOUR PERMIT IS \$15.00 **CASH ONLY**. WALLET SIZE (PHOTO ID) INCLUDED.

THE PROVISIONAL PERMIT IS ONLY GOOD FOR 3 YEARS,
OR WILL EXPIRE ON YOUR 21ST BIRTHDAY.

HOURS: MONDAY – WEDNESDAY – FRIDAY
BY APPOINTMENT ONLY

YOU CAN CALL (304)291-7260 TO SET UP YOUR APPOINTMENT

WEST VIRGINIA STATE POLICE
APPLICATION FOR PROVISIONAL CONCEALED PISTOL/REVOLVER LICENSE

(This application must be completed in ink or by typewriter)

To the Sheriff of _____ County, I, the below named applicant, swear/affirm, under penalty of law, that the information contained within this application is true and correct to the best of my knowledge.

DATE SUBMITTED: ___/___/___ APPLICATION TYPE: Initial Honorably Discharged LEO Sheriff Waived

NAME: _____ CONTACT #: _____
Last First Middle

ADDRESS: _____
Street City State Zip

DOB: ___/___/___ SSN: _____ - _____ - _____ PLACE OF BIRTH: _____

COUNTRY OF CITIZENSHIP: _____ ALIEN/ADMISSION #: _____ (If not US citizen)

HT: _____ Ft. _____ In. WT: _____ RACE: _____ SEX: M F EYES: _____ HAIR: _____

SCARS, MARKS, AND/OR TATTOOS (Description and location): _____

I am a bona fide resident of _____ county, WV and present the following original, valid WV issued photo ID in support of this assertion (Photocopy of ID must be attached to this application):

WV Driver's License# _____ WV Non-Driver's ID # _____ Other (Describe) _____

Answer each of the following questions by checking **YES** or **NO**:

QUESTION	YES	NO
1. Are you at least 18 and less than 21 years of age?		
2. Are you addicted to alcohol, a controlled substance or drug, or are you an unlawful user thereof?		
3. Have you been convicted of a felony?		
4. Have you been convicted of an act of violence or an act of Domestic Violence?		
5. Are you under indictment or do you have any criminal charges pending against you?		
6. Are you currently serving a sentence of confinement, parole, probation or other court ordered supervision due to a charge of domestic violence as provided for in 61-2-28 of the Code of West Virginia?		
7. Are you the subject of a restraining order as a result of a domestic violence act as defined in 61-2-28 of the Code of West Virginia or subject to a verified petition of domestic violence or subject to a protective order as provided for in 48-2a of the Code of West Virginia?		
8. Have you ever been adjudicated to be mentally incompetent?		
9. Do you have two (2) or more convictions for DUI related offenses?		
10. In the last three (3) years prior to this application, have you been in a residential or court ordered treatment facility for alcoholism and /or alcohol/drug detoxification treatment?		
11. If you are applying for a license to carry a concealed handgun, have you qualified under the minimum requirements for the handling and firing of a handgun as set forth in 61-7-4 of the Code of West Virginia? If YES, attach a copy of the certificate of completion to this application. The Sheriff will determine applicability of this section to Retired Law Enforcement Officers and Renewal Applicants.		
12. Are you physically and mentally competent to carry a handgun		

NOTE: If any of questions 2-10 listed above are answered YES, then a brief letter of explanation of each question must accompany this form.

I hereby authorize the Sheriff of _____ County, to conduct an investigation into information contained in this application. Furthermore, I understand that the falsification of any information contained within this application constitutes false swearing and is a misdemeanor punishable under the provisions of 61-5-2 of the Code of West Virginia.

Applicant's Signature X _____ Date _____

LOCATIONS IN WEST VIRGINIA WHERE FIREARMS ARE RESTRICTED OR FORBIDDEN

**FIREARMS, CONCEALED OR OTHERWISE, ARE BY LAW NOT ALLOWED IN THE
FOLLOWING LOCATIONS:**

- 1. FEDERAL GOVERNMENT PROPERTIES OR OTHER PLACES WHERE FIREARMS ARE PROHIBITED BY FEDERAL LAW. THIS INCLUDES AREAS OF RESTRICTED ACCESS IN AIRPORTS.**
- 2. ANY PROPERTY WHERE FIREARMS ARE PROHIBITED BY THE OWNER OR OPERATOR.**
- 3. LAW ENFORCEMENT OFFICES OR STATIONS.**
- 4. REGIONAL JAILS, DETENTION FACILITIES OR STATE DIVISION OF CORRECTIONS FACILITIES.**
- 5. COUNTY COURTHOUSES OR ANY FACILITY HOUSING A COURT OF THIS STATE.**
- 6. ANY SCHOOL BUILDING, PROPERTY OR GROUNDS OR ANY SCHOOL BUS OR CONVEYANCE.**

WV CODE § 61-7-11a