

# **PLEASE READ PRIOR TO COMPLETING**

## **REQUIREMENTS FOR CONCEALED WEAPON PERMITS**

1. YOU MUST **FIRST** COMPLETE THE REQUIRED SAFETY COURSE.
2. PROPERLY FILL OUT THE APPLICATION, BUT **DO NOT** SIGN AND DATE UNTIL IN FRONT OF A NOTARY.
3. HAVE A VALID WEST VIRGINIA DRIVER'S 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 \$75.00 **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 **\$25.00 CASH ONLY**. WALLET SIZE (PHOTO ID) INCLUDED.

## **YOU WILL NEED TO BRING THE FOLLOWING**

### **COPY OF YOUR WEST VIRGINIA DRIVER'S LICENSE**

OR STATE ISSUED PHOTO ID  
HANDGUN TRAINING CERTIFICATE  
PROCESSING FEE **CASH ONLY**

### **RENEWAL PROCESS ONLY:**

1. CALL 3 TO 4 WEEKS PRIOR TO YOUR PERMIT EXPIRING TO SEE WHAT THE TURN AROUND TIME IS.
2. FILL OUT THE APPLICATION.
3. BRING PHOTO COPY OF YOUR DRIVER'S LICENSE.
4. BRING \$75.00 PROCESSING FEE. **CASH ONLY**.

**HOURS: MONDAY – WEDNESDAY - FRIDAY  
BY APPOINTMENT ONLY**

## **EFFECTIVE MAY 2016**

YOU MUST USE THE REVISED APPLICATION FROM THE WVSP FORM 44A  
REVISED 05/2016

**YOU MUST CALL FIRST TO SCHEDULE AN APPOINTMENT**  
**(304)291-7260**

**WEST VIRGINIA STATE POLICE**  
**APPLICATION FOR 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  Renewal  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 under 21 years of age? If yes Provisional Application form 44C must be completed  |     |    |
| 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 for 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 \_\_\_\_\_

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

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

1. The applicant will complete the form (ink or type) and affix his/her signature which must be witnessed by a notary.
2. The completed form will be presented to the Sheriff of the applicant's resident county accompanied by the required \$75.00 application fee.
3. The Sheriff will conduct an investigation relative to the information contained in the application as required by state law. Any request for criminal history information from the State Police will be made using established protocol.
4. Upon completion of the investigation and if a license to carry a concealed pistol/revolver is approved and issued, the applicant will pay to the Sheriff an additional \$25.00 fee. The Sheriff will immediately forward to the State Police a certified copy of the approved application and will forward within thirty (30) days the \$25.00 fee to the following address:

Superintendent  
West Virginia State Police  
Attention: Concealed Weapon Registry  
701 Jefferson Road  
South Charleston, WV 25309-1698

**NOTE:** Fees waived for the following officials effective July 1, 2013:

Any justice of the Supreme Court of Appeals of West Virginia; any circuit judge; any retired justice or retired circuit judge designated senior status by the Supreme Court of Appeals of WV; any family court judge; any magistrate; any prosecuting attorney; any assistant prosecuting attorney; or any duly appointed investigator employed by a prosecuting attorney.

**NOTE: No application will be accepted without the NICS Transaction Number listed.**

**NOTE:** When forwarding the \$25.00 fee to the West Virginia State Police, the Sheriff must provide the name, date of birth and date of application approval for each \$25.00 fee remitted. **NOTE:** Provisional license will expire at age 21.

Applicant Name: \_\_\_\_\_

Applicant DOB: \_\_\_\_\_ Phone contact: \_\_\_\_\_

|  |  |
|--|--|
| <p>Subscribed and sworn before me, in said County and State, this the _____ day of _____, 20____.</p> <p>My commission expires: _____</p> <hr/> <p style="text-align: center;">Notary public signature</p> <p>SEAL:</p> <hr/> <p>Date application received: ____/____/____</p> <p>Received by: _____</p> <p style="text-align: center;"><b>SHERIFF DEPARTMENT USE ONLY</b></p> | <p><b>THIS BLOCK TO BE COMPLETED ONLY UPON APPROVAL OF APPLICATION BY SHERIFF</b></p> <p>III Check <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>WV CRIMINAL RECORD CHECK <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>STATE ID No. _____</p> <p>NICS Check: <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>NICS TRANSACTION No.(NTN): _____</p> <p><b>NOTE: Application will be returned without NTN#</b></p> <p>I, _____</p> <p>Sheriff of _____ County, WV certify this document to be a true and accurate copy of the APPROVED APPLICATION for a Concealed Pistol/Revolver Permit for the person identified herein and have issued a permit as required by law.</p> <hr/> <p style="text-align: center;">Signature</p> <p>_____/_____/____      ____/____/____</p> <p style="text-align: center;">Approval Date                      Expiration Date</p> |
|--|--|

# **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**