Department of Safety & Homeland Security

APPLICATION FOR HANDGUN CARRY PERMIT

(Please select one box on the left and one box on the right)

☐ Concealed ☐ Enhanced ☐ Lifetime ☐ New ☐ Renewal ☐ Duplicate

Name: _____ (Last) _____ (First) _____ (Middle) _____ (Applicant's Driver License#)

_____ (Any Aliases) _____ (Place of Birth (City, State))

_____ (Current Physical Address) _____ (City) _____ (State) _____ (County) _____ (Zip Code)

_____ (Mailing Address *(If Different from Current Physical Address)*)

You must list your addresses for the last five (5) years. (Provide on a separate sheet.)

_____ (Home Phone) _____ (Work Phone)

_____ (Date of Birth) _____ (Sex) _____ (Race) _____ (Height (ft/in)) _____ (Weight (lbs)) _____ (Hair Color) _____ (Eye Color)

Please read each line and check the corresponding box if you certify that line is correct.

- ☐ I certify that I am at least eighteen (18) years of age or older.
- ☐ I am a United States Citizen or a Lawful Permanent Resident.
- ☐ I am a resident of Tennessee; or a valid out-of-state permit holder who has proof of being currently employed in Tennessee for at least thirty (30) hours per week for six (6) consecutive months. Only Tennessee residents qualify for the Concealed Carry Permit.

You Must Not Be Prohibited from Purchasing or Possessing A Handgun in This Or Any Other State.

- ☐ I do not have a felony conviction and I am not currently under indictment for a felony.
- ☐ I do not have a conviction for domestic violence and I do not have a charge pending for domestic violence.
- ☐ I am not a fugitive from justice.
- ☐ I have not been discharged from the Armed Forces under dishonorable conditions.
- ☐ I am not an illegal alien or unlawfully in the United States.
- ☐ I have not renounced my United States citizenship.
- ☐ I do not have an Order of Protection, or a restraining order filed against me.
- ☐ I am not an unlawful user of or addicted to alcohol or any controlled substance or controlled substance analogue.
- ☐ I am not a patient in a rehabilitation program, and I have not been hospitalized for alcohol, controlled substance or controlled substance analogue within ten (10) years (if court ordered) or three (3) years (if voluntary).
- ☐ I have not had two (2) convictions for DUI in ten (10) years, with one (1) of those being within the last five (5) years.
- ☐ I am not currently under the jurisdiction of the court for a DUI or any other Class A Misdemeanor conviction.
- ☐ I have never been adjudicated as a mental defective or committed to/or hospitalized in a mental institution.
- ☐ I have not had a court appoint a conservator for me by reason of mental defect.
- ☐ I have not been judicially determined to be disabled by reason of mental illness, development disability, or other mental incapacity.
- ☐ I have not been found by a court to pose an immediate substantial likelihood of serious harm, because of mental illness within seven (7) years from the date of application.
- ☐ I have not been convicted of stalking and I have no pending charge(s) for stalking.
- ☐ I am not receiving social security disability benefits by reason of alcohol dependence, drug dependence, or mental disability.
- ☐ If under 25 years old, I certify that I have not been adjudicated delinquent on or after July 1, 2024, for an act which, if committed by an adult, would have constituted one (1) or more of the following offenses: aggravated assault; aggravated assault against a first responder or nurse; criminal homicide; robbery; burglary; aggravated cruelty to animals; a threat of mass violence; any violation of title 39 involving the use or display of a firearm.
- ☐ I understand that making any false oral or written statement, or exhibiting any false or misrepresented identification or documentation, with the intent to deceive, is punishable as a felony offense pursuant to the penalties of perjury. (T.C.A. §39-16-702)
- ☐ I certify that I have read and understand the current state laws on carrying handguns.

By signing this form, I agree that I meet the eligibility requirements for a Handgun Carry Permit (T.C.A. §39-17-1366 and T.C.A. §39-17-1351), I understand that I cannot legally carry in certain areas until I have received my permit, and that I must have my permit in my possession while carrying in certain areas.

Applicant's Signature: _____ **Date:** _____

Examiner's Signature: _____ **Station #:** _____ **Date:** _____

FEES ARE NON-REFUNDABLE