



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY



Firearm Permit Unit
Application for Concealed Carry Firearm Permit
(Initial and Renewal)

SECTION I.a - Initial Applicants only

THIS APPLICATION WILL NOT BE PROCESSED UNLESS ALL APPLICABLE QUESTIONS HAVE BEEN ANSWERED, and all supporting documents are attached. You may pay with MasterCard/ Visa, Debit or Credit Card, Cash or Cashier's Check in the amount of \$132.00, (\$100.00 permit fee, \$32.00 fingerprint fee), made payable to the Mississippi Department of Public Safety. Retired law enforcement officers fee is \$32.00 for fingerprint/background check.

SECTION I.b - Renewal Applicants only

THIS APPLICATION WILL NOT BE PROCESSED UNLESS ALL APPLICABLE QUESTIONS HAVE BEEN ANSWERED, and all supporting documents are attached. If paying in person, you may pay with, MasterCard/ Visa Debit or Credit Card, Cash or Cashier's Check in the amount of \$82.00, (\$50.00 permit fee, \$32.00 background check), made payable to the Mississippi Department of Public Safety. Payment for applicants 65 years of age and older, the fee is \$57.00, (\$25.00 permit fee, \$32.00 background check). Retired law enforcement officers fee is \$32.00 for fingerprint/background check. If renewing by mail, only cashier check accepted.

SECTION II. - Initial and Renewal Applicants

LAST NAME			FIRST NAME		MIDDLE NAME	
DRIVER LICENSE #			DL STATE			
RESIDENCE ADDRESS STREET 1				RESIDENCE ADDRESS STREET 2		
CITY		STATE	ZIP CODE	COUNTY		
MAILING ADDRESS STREET 1 (if different than residential)				MAILING ADDRESS STREET 2		
CITY		STATE	ZIP CODE	COUNTY		
DATE OF BIRTH	GENDER	RACE		OCCUPATION		
PLACE OF BIRTH (City, State, Country)				HOME PHONE		CELL PHONE
				EMAIL ADDRESS		
ARE YOU RETIRED LAW ENFORCEMENT?				<input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, PROVIDE RETIREMENT DOCUMENTATION .						

SECTION III. - Initial Applicants Only - List chronologically all of your residences for the past two years

Date		Street Address 1	Street Address 2	City	State
From:	To:				

SECTION IV. - Initial and Renewal Applicants

HAVE YOU EVER BEEN CONVICTED IN ANY COURT OF A FELONY? WHAT WAS THE CHARGE? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO
HAVE YOU EVER BEEN CONVICTED AS A SEX OFFENDER?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, WAS IT A MISDEMEANOR OR FELONY?	<input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	

SECTION V. AFFIDAVIT - Initial and Renewal Applicants

THIS APPLICATION AND REQUIRED SUPPORTING DOCUMENTS ARE EXECUTED UNDER OATH. FALSIFICATION OR MISREPRESENTATION OF ANY PART OR ANY DOCUMENT SUBJECTS THE APPLICANT TO CRIMINAL PROSECUTION UNDER MISSISSIPPI STATUTES AND DENIAL OF A FIREARM PERMIT.

STATE OF MISSISSIPPI
COUNTY OF _____

BEFORE ME ON THIS DAY PERSONALLY APPEARED _____, who, being duly sworn, deposes and says I DO SWEAR OR AFFIRM THAT I have been furnished a copy of Mississippi Code 45-09-101, that I desire a legal means to carry a concealed weapon to defend myself, that the information contained in this application and all attached supporting documents are true and correct to the best of my knowledge.

SIGNATURE OF APPLICANT

Sworn to and subscribed before me, this ____ day of _____, 20 ____.

MY COMMISSION EXPIRES

NOTARY PUBLIC, STATE OF MISSISSIPPI