

## **INSTRUCTIONS FOR:**

## APPLICATION FOR CERTIFICATION OF NON-DESTRUCT OF WEAPON(S)

- 1. Turn the firearm(s) in to your nearest Police Department and request a property receipt and a computer "No Record" printout for each firearm. If the police agency will not release a computer generated "No Record" print-out, we will need written verification from them that there is no record of the gun in the system. Do NOT surrender firearms to the New York State Police for safekeeping.
- 2. Bring or mail the following to The Pistol Permit Department:
  - a. Property Receipt from Police
  - b. "No Record" printout for each firearm
  - c. Completed Non-Destruct application which is attached to this instruction sheet.
  - d. A letter from the person you received the gun from, if applicable.
- 3. Once the paperwork has been processed by our department and approved by the Licensing Officer, you will receive an approval letter in the mail.
- 4. After you receive your approval letter, you will need to register the weapon on your permit.

If you have any questions, please contact us at 858-8785, option 3



## **APPLICATION FOR CERTIFICATE OF NON-DESRUCTION OF WEAPON(S)**

| Full Name                             |                        |                | SSN#               | Date of Birth     |  |
|---------------------------------------|------------------------|----------------|--------------------|-------------------|--|
|                                       |                        |                | 1 22               |                   |  |
| Full Address (INCL City, State & Zip) |                        |                | Cell Number        | Cell Number       |  |
|                                       |                        |                |                    |                   |  |
| Mailing Address (if different)        |                        |                | Home Number        | Home Number       |  |
|                                       |                        |                | 1.0.10             |                   |  |
|                                       |                        |                |                    |                   |  |
| DESCRIBE IN 1                         | DETAIL HOW YOU AC      | COUIRED THE WE | APON(S) – INCLUDIN | NG NAME, ADDRESS. |  |
|                                       | IOUS OWNER AS WE       | •              | , ,                |                   |  |
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|                                       |                        |                |                    |                   |  |
|                                       |                        |                |                    |                   |  |
| NA IZE                                | DEV C/A                | MODEL          | CALIDED            | CEDIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| MAKE                                  | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
|                                       | REV or S/A             | MODEL          | CALIBER            | SERIAL #          |  |
| SIGNATURE: _                          |                        |                | CALIBER            | SERIAL #          |  |
| SIGNATURE: _                          | SIGNATURE MUST BE NOTA | RIZED)         |                    |                   |  |
| (                                     |                        | RIZED)         |                    |                   |  |
| SIGNATURE: _                          | SIGNATURE MUST BE NOTA | RIZED)         |                    |                   |  |
| SIGNATURE: _                          | SIGNATURE MUST BE NOTA | RIZED)         |                    |                   |  |
| JIGNATURE: _<br>(<br>worn to and su   | SIGNATURE MUST BE NOTA | RIZED)         |                    |                   |  |