

**GUAM POLICE DEPARTMENT
RECORDS & IDENTIFICATION SECTION
P.O. Box 23909 GMF Barrigada, Guam 96921
CONCEALED FIREARMS LICENSE APPLICATION**

REQUIREMENTS:

1. Must have a current Guam Firearms License
2. Must be 21 years of age or older
3. Demonstrates competency with a firearm; evidenced by a photocopy of a certificate of completion:
 - a. DD214 with notation of firearms training and honorable discharge (unlimited date of issuance)
 - b. National Rifle Association Firearms Safety/Training Course (no more than 5 years from the date of issuance)
 - c. Law Enforcement, College, Junior College, Public or Private Firearms Training School that provides instructors certified by the; National Rifle Association, Criminal Justice Standards and Training Commission, or the Guam Police Department (no more than 5 years from the date of issuance)
 - d. Law Enforcement Firearms Training course offered for security guards, investigators, special deputies, or any other division or subdivision of law enforcement or security enforcement. (no more than 5 years from the date of issuance)
 - e. Firearms training or safety course or class conducted by a Guam-certified or National Rifle Association certified firearms instructor (no more than 5 years from the date of issuance)
5. For Renewal of a current CONCEALED Firearms License applicants must reapply one (1) months in advance for any subsequent concealed firearm I.D. Card. Late fee: \$15.00
6. A Firearms License may not be renewed one hundred and eighty (180) days or more after expiration and is deemed permanently expired. Reapplication, subject to a background check, is required.
7. If application is approved, a service fee of \$103.00 will be assessed.

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FOR OFFICE USE

NEW
FAID EXP. DATE: _____

RENEWAL
FAID EXP. DATE: _____

FOR OFFICE USE ONLY

Control # _____
FP # _____
FBI # _____
CLERK INITIALS: _____

Date of Application: _____ **Firearm ID No.:** _____

Last Name: _____ **First Name:** _____ **Middle Name:** _____

Date of Birth: _____ **Social Security Number:** _____

Contact No. Home: _____ **Work:** _____ **Mobile:** _____

Home/Mailing Address: _____

Email Address: _____

Employer/Occupation: _____

Type of Firearm Used: _____

Serial No.: _____ **Model:** _____

- | | | |
|---|------------------------------|-----------------------------|
| 1. Are you a resident of Guam? | YES
<input type="radio"/> | NO
<input type="radio"/> |
| 2. Do you suffer from a physical or mental infirmity which prevents the safe handling of a weapon or firearm? | YES
<input type="radio"/> | NO
<input type="radio"/> |
| 3. Have you ever been convicted of a felony? | YES
<input type="radio"/> | NO
<input type="radio"/> |
| 4. Have you ever been committed for the abuse of a controlled substance? | YES
<input type="radio"/> | NO
<input type="radio"/> |

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5. Have you been found guilty under the laws of Guam or similar laws of any other state relating to controlled substances in the last three years? YES NO
6. Have you been convicted of the following offenses in the last three years?: YES NO
- a. Influence of Alcohol and Controlled Substances; Causing Bodily Injury to Person Other Than Driver; Alcoholic Content in Blood
 - b. Driving While Intoxicated
 - c. Vehicular Negligence
 - d. Vehicular Homicide
 - e. Drinking While Driving a Motor Vehicle Upon Any Highway
 - f. Drinking in Motor Vehicle Upon Highway
 - a. Possession of Opened Container in a Motor Vehicle
 - h. Storage of Opened Container
 - i. Suspension of Driver's License
 - j. Driving While License Suspended
7. Have you ever been committed to a mental institution under Guam law or similar laws of any other state? YES NO
- If so, you must provide a certificate from a licensed psychiatrist that you have not suffered from disability for the last five (5) years.
8. Have you had adjudication withheld or imposition of sentence suspended on any felony? YES NO
- If so, you must provide proof that you have fulfilled probation or any other conditions set by a court for the last ten (10) years.
9. Have you ever been convicted of a misdemeanor crime of Family violence? YES NO
- If so, you must provide proof that you have fulfilled probation or any other conditions set by the court for the last ten (10) years

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- | | | |
|---|------------------------------|-----------------------------|
| 10. Are you currently under order of an injunction in force and effect that
Restrains you from committing acts of violence or acts of repeat violence? | YES
<input type="radio"/> | NO
<input type="radio"/> |
| 11. Are you currently prohibited from purchasing or possessing a firearm
By any provision of Guam Law or Federal Law? | YES
<input type="radio"/> | NO
<input type="radio"/> |

****If firearm is to be used in business, have your employer attest to this application. (If Military, commander of Military Police).**

EMPLOYER'S SIGNATURE: _____

PRINT NAME AND TITLE: _____

SIGNATURE OF APPLICANT: _____

I UNDERSTANT THAT KNOWINGLY GIVING FALSE INFORMATION OR KNOWINGLY OFFERING FALSE EVIDENCE OF ANY OF THE FACTS REQUIRED ABOVE IS A VIOLATION OF TITLE 10 GCA, SECTION § 60114(e), AND IS PUNICHABLE BY ARREST AND A PENALTY OF LOSING MY RIGHT TO A FIREARM LICENSE FOR 10 YEARS. I SWEAR THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT

APPROVED



DISAPPROVED



CHIEF OF POLICE

