THE STATE OF ALABAMA

PERMIT#----------

RANDOLPH COUNTY

DATE_____

TO JEFFERY FULLER

SHERIFF OF RANDOLPH COUNTY

I HEREBY APPLY FOR LICENSE TO CARRY A REVOLVER OR PISTOL CONCEALED ON MY PERSON OR IN MY VEHICLE FOR A PERIOD OF NOT MORE THAN ONE YEAR FROM THE DATE OF ISSUANC FOR THE FOLLOWING REASON:_____

PLEASE PRINT

NAME_____

ADDRESS_____CITY_____STATE_____

DATE OF BIRTH____/_____/_____ PLACE OF BIRTH_____ SSN_____ -_____-_____

DRIVERS LICENSE#_____ STATE_____

RACE_____ SEX_____ AGE_____ WEIGHT_____ HEIGHT_____

HAIR_____ EYES_____ PHONE# ( )_____

EMPLOYED BY_____OCCUPATION_____

HAVE YOU EVER HAD A PISTOL PERMIT? YES_____ / NO_____ YEAR ISSUED_____

HAS AN APPLICATION EVER BEEN DENIED? YES_____ / NO_____

WHY_____

HAS YOUR PERMIT EVER BEEN REVOKED OR CANCELLED?YES ____ / NO _____ **WHY**_____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME YES ____ / NO____ IF SO, WHAT AND WHEN?_____

GUN MAKE_____**SERIAL #**_____ **CALIBER**_____

CHARACTER REFERENCE:

NAME_____OCCUPATION_____YEARS ACQUAINTED_____

NAME_____OCCUPATION_____YEARS ACQUAINTED_____

NAME_____OCCUPATION_____YEARS ACQUAINTED_____