

Office of the Sheriff

Ernie Coleman
SHERIFF

Beaufort County Sheriff's Office
210 North Market Street
Washington, NC 27889

Office: 252-946-7111
Fax: 252-946-0993

CONCEALED WEAPON PERMIT APPLICATION PROCESS

COMPLETED NEW APPLICATIONS accepted Monday, Wednesday or Friday from 8:30 am - 11:20 am. Fingerprints are required for new applications and will be taken when a new application is submitted. Copy of driver's license, original class certificate and copy of DD-214 (if a former member of the military) showing Honorable Discharge required.

COMPLETED RENEWAL APPLICATIONS accepted Monday thru Friday, 8:30 – 5:00 pm. Copy of driver's license and current concealed required.

FORMS REQUIRED FOR ALL APPLICATIONS:

- *Application For Concealed Handgun Permit:* please fill in entire top portion on page one and answer all questions.
- *Page two:* get notarized (notary is available at Sheriff's Office for this purpose only). Be sure to check Renewals box if renewal application.
- *Release of Physical and Mental Health:* fill out entire top portion and get notarized (notary is available at Sheriff's Office for this purpose only)

****NOTE**** Address on current driver's license and application must match for application to be accepted.

IMPORTANT INFORMATION:

- ❖ Applicants must be 21 or over, a citizen of the United States, and a resident of North Carolina for at least 30 days.
- ❖ Applications for a Concealed Weapon Permit can be picked up at the Sheriff's Office any time during regular business hours, *Monday through Friday 8:00 AM to 5:00 PM* or printed on-line.
- ❖ Cash only accepted.
- ❖ ALL FEES ARE NONREFUNDABLE

Fee Schedule (CASH ONLY)

New Application fee	\$80.00
Fingerprinting fee	\$10.00
Renewal Application fee	\$75.00
Duplicate Card fee	\$15.00

“CAUTION: Federal law and State law on the possession of handguns and firearms may differ. If you are prohibited by federal law from possessing a handgun or a firearm, you may be prosecuted in federal court. A State permit is not a defense to a federal prosecution.”

STATE OF NORTH CAROLINA

APPLICATION FOR CONCEALED HANDGUN PERMIT

Name of Applicant (Last, First, Middle, Maiden) ► Attach listing of all previous addresses and all name changes including location and court file number (if Applicable)

☐ NEW PERMIT

☐ RENEWAL PERMIT

☐ DUPLICATE

☐ EMERGENCY TEMPORARY PERMIT

G. S. 14-415.10 et seq.

Street Address

Date of Birth

Social Security Number
► See Notification on page 3

City

State

Zip Code

Driver's License Number (State ID Number if no driver's license)

State

Mailing Address

Military Status

☐ Active ☐ Reserve

☐ Discharged ☐ Retired ☐ N/A

Race
► See below for code

Sex

Hair

Telephone Number

County of Residence

BEAUFORT

Eyes

Height

Weight

Other Physical Description

► RACE CODES: A-Asian or Pacific Islander, B-Black, I-American Indian or Alaskan Native, U-Unknown, W-White

APPLICATION

I, the undersigned applicant, being duly sworn, hereby make application for a North Carolina Concealed Handgun Permit and state that the following information is correct to the best of my knowledge.

(Check Appropriate Boxes)

1. Are you a citizen of the United States? (1) ☐ Yes ☐ No
* If No: Have you been lawfully admitted for permanent residence? * ☐ Yes ☐ No
► If Yes, attach documentation
2. Are you 21 years of age or older? (2) ☐ Yes ☐ No
3. Have you been a resident of North Carolina for 30 days or longer immediately preceding the date of this application? (3) ☐ Yes ☐ No
4. Do you suffer from a physical or mental infirmity that prevents the safe handling of a handgun? (4) ☐ Yes ☐ No
5. Have you successfully completed an approved firearms safety and training course which involved the actual firing of handguns and instruction in the laws of North Carolina governing the carrying of a concealed handgun and the use of deadly force? ► If Yes, attach documentation (5) ☐ Yes ☐ No
* If No: Do you meet any of the exceptions in N.C.G.S. § 14-415.12A? * ☐ Yes ☐ No
► If Yes, attach documentation
6. Are you ineligible to own, possess, or receive a firearm under the provisions of State or federal law? (6) ☐ Yes ☐ No
7. Are you under indictment or has a finding of probable cause been entered against you for a pending felony charge? (7) ☐ Yes ☐ No
8. Have you been adjudicated guilty in any court of a felony? (8) ☐ Yes* ☐ No
* If Yes: Have your firearm rights been restored pursuant to N.C.G.S. § 14-415.4? * ☐ Yes ☐ No
► If Yes, attach documentation
9. Are you a fugitive from justice? (9) ☐ Yes ☐ No
10. Are you an unlawful user of (or addicted to) marijuana, alcohol, or any depressant, stimulant, or narcotic drug, or any other controlled substance as defined in 21 U.S.C. § 802? (10) ☐ Yes ☐ No
11. Are you currently or have you been previously adjudicated or administratively determined to be lacking mental capacity or mentally ill? (11) ☐ Yes ☐ No
12. Have you been discharged from the U.S. Armed Forces under conditions other than honorable? (12) ☐ Yes ☐ No
13. Have you been adjudicated guilty of, or received a prayer for judgment continued for, or received a suspended sentence for, one or more crimes of violence constituting a misdemeanor, including but not limited to, a violation of the disqualifying criminal offenses listed on page 3 of this form? ► See "List of Disqualifying Criminal Offenses" on page 3 (13) ☐ Yes ☐ No
14. Have you had an entry of prayer for judgment continued for a criminal offense which would disqualify you from obtaining a handgun permit? (14) ☐ Yes ☐ No
15. Are you free on bond or personal recognizance pending trial, appeal, or sentencing for a crime which would disqualify you from obtaining a concealed handgun permit? (15) ☐ Yes ☐ No
16. Have you been convicted of an impaired driving offense under N.C. G.S. § 20-138.1, 20-138.2, or 20-138.3 within three years prior to the date of this application? (16) ☐ Yes ☐ No

- ☐ I hereby apply for a Temporary Emergency Permit for a nonrenewable period of up to 45 days based upon the information set forth below. I reasonably believe that an emergency situation exists which may constitute a risk of safety to me, my family, or my property.

State Grounds for Temporary Emergency Permit (Use attachment if necessary)

- ☐ (To be completed for RENEWALS only) – I currently hold a valid Concealed Handgun Permit issued by the _____ County Sheriff's Office. I hereby affirm that I remain qualified to receive and possess this Concealed Handgun Permit pursuant to the criteria set forth in Article 54B of Chapter 14 of the NC General Statutes and the criteria outlined in this application.

SWORN TO AND SUBSCRIBED TO BEFORE ME		Date
Date	Signature of Person Authorized to Administer Oaths	Signature of Applicant
Title	CAUTION Federal law and State law on the possession of handguns and firearms may differ. If you are prohibited by federal law from possessing a handgun or a firearm, you may be prosecuted in federal court. A State permit is not a defense to a federal prosecution.	
Date Commission Expires _____ SEAL		

SHERIFF USE ONLY

Check List — check applicable boxes:

- | | |
|---|---|
| 1. Nonrefundable Permit Fee Paid <input type="checkbox"/> | 8. Date Issued Temporary Permit _____ |
| 2. One Full Set of Fingerprints Administered by the Sheriff's Office <input type="checkbox"/> | 9. Date Denied Temporary Permit _____ |
| 3. Original Certificate of Completion
of Approved Firearms Safety & Training Course <input type="checkbox"/> | 10. Date Issued Permit _____
Permit Number _____ |
| 4. Renewal—Waiver of Application Firearm Safety & Training Course ... <input type="checkbox"/> | 11. Date Denied Permit _____ |
| 5. Attachment(s) (Specify) _____ <input type="checkbox"/> | 12. Date Submitted to SBI _____ |
| 6. Temporary Documentation <input type="checkbox"/> | 13. NICS Transaction Number (NTN) _____ |
| 7. Other (Specify) _____ <input type="checkbox"/> | |

Signature of Sheriff: _____

Original – Sheriff / Copy – Applicant

LIST OF DISQUALIFYING CRIMINAL OFFENSES

► **NOTE:** Effective July 1, 2015 for all CHP applications – an applicant who has been found guilty of or received a prayer for judgment continued or a suspended sentence for one of the offenses listed in 1-20, AND THREE YEARS HAS PASSED PRIOR TO SUBMITTING THE APPLICATION, can receive a Concealed Handgun Permit.

1. Simple assault N.C.G.S. § 14-33(a)
2. Violation of court orders N.C.G.S. § 14-226.1
3. Furnishing poison, controlled substances, deadly weapons, cartridges, ammunition, or alcoholic beverages to inmates of charitable, mental or penal institutions, or local confinement facilities N.C.G.S. § 14-258.1
4. Carrying weapons on campus or other educational property N.C.G.S. § 14-269.2
5. Carrying weapons into assemblies and establishments where alcoholic beverages are sold and/or consumed N.C.G.S. § 14-269.3
6. Carry weapons on State property and courthouses N.C.G.S. § 14-269.4
7. Possession and/or sale of spring-loaded projectile knives N.C.G.S. § 14-269.6
8. Impersonation of a law enforcement officer or other public officer N.C.G.S. § 14-277
9. Communicating threats N.C.G.S. § 14-277.1
10. Carry weapons at parades and other public gatherings N.C.G.S. § 14-277.2
11. Exploding dynamite cartridges and/or bombs (except fireworks violations under N.C.G.S. § 14-414) N.C.G.S. § 14-283
12. Rioting and inciting a riot N.C.G.S. § 14-288.2
13. Fighting or conduct creating the threat of imminent fighting or other violence N.C.G.S. § 14-288.4(a)(1)
14. Looting and trespassing during an emergency N.C.G.S. § 14-288.6
15. Assault on emergency personnel N.C.G.S. § 14-288.9
16. Violations of City state of emergency ordinances N.C.G.S. § 14-288.12
17. Violations of County state of emergency ordinances N.C.G.S. § 14-288.13
18. Violations of State of emergency ordinances N.C.G.S. § 14-288.14
19. Violations of the standards for carrying a concealed weapon N.C.G.S. § 14-415.21(b)
20. Misrepresentation on certification of qualified retired law enforcement officers N.C.G.S. § 14-415.26(d)

► **NOTE:** Offenses listed in 21-32 are permanent disqualifiers for a Concealed Handgun Permit.

21. Assault inflicting serious injury or using deadly force N.C.G.S. § 14-33(c)(1)
22. Assault on a female N.C.G.S. § 14-33(c)(2)
23. Assault on a child under the age of 12 N.C.G.S. § 14-33(c)(3)
24. Assault inflicting serious injury or using a deadly weapon on a person in a personal relationship and in the presence of a minor N.C.G.S. § 14-33(d)
25. Stalking N.C.G.S. § 14-277.3A
26. Child abuse N.C.G.S. § 14-318.2
27. Domestic criminal trespass N.C.G.S. § 14-134.3
28. Domestic violence protective order violations N.C.G.S. § 50B-4.1
29. Stalking Former N.C.G.S. § 14-277.3
30. Any person convicted of a "misdemeanor crime of domestic violence" as defined in federal law at 18 USC 922(g)(8).
31. Any crimes involving assault or a threat to assault a law enforcement officer, probation or parole officer, person employed at a State or local detention facility, firefighter, emergency medical technician, medical responder, or emergency department personnel.
32. Misdemeanor crimes that involve violence (other than the misdemeanors listed in items 1-20).
33. Misdemeanor crimes under Article 8 of Chapter 14 (other than the misdemeanors listed in items 1-20).

► **SOCIAL SECURITY NUMBER:** The disclosure of your social security number as a part of this Concealed Handgun Permit application is voluntary. The purpose of requesting the social security number is to assist in your identification and to help distinguish you from other persons with similar names. No Concealed Handgun Permit will be denied for failure to **disclose** a social security number.

STATE OF NORTH CAROLINA BEAUFORT County	RELEASE OF PHYSICAL AND MENTAL HEALTH, SUBSTANCE ABUSE AND CONFIDENTIAL COURT RECORDS FOR CONCEALED HANDGUN PERMIT																	
<i>Name And Address Of Applicant</i>	<i>Date Of Birth</i>																	
	<i>Social Security No.</i>																	
	<i>State Drivers License No. (State Identification No. If No Drivers License)</i>	<i>State</i>																
<p>I hereby authorize and require any and all doctors, hospitals or other providers who have ever provided physical or mental health or substance abuse treatment or care to me, including without limitation the providers named below, to release to the sheriff of the above named county any and all records concerning my physical capacity, mental health, mental capacity or substance abuse that the sheriff may reasonably request in connection with my application for a concealed handgun permit. The purpose of the release is to enable the sheriff to determine my qualification and competence to handle a handgun. I understand that alcohol and substance abuse information is protected by federal regulations and that other confidential records such as psychiatric information may be protected by North Carolina statute. Accordingly, I specifically authorize the release of any and all alcohol, substance abuse and psychiatric information that may be documented in my records.</p> <p>I understand that further disclosure or redisclosure by the sheriff of any information disclosed to the sheriff pursuant to this Release is prohibited without my further written consent unless otherwise provided for by state or federal law. I understand that I may revoke this authorization at any time except to the extent that action has already been taken in reliance on this Release. Even without my express revocation, this Release will expire upon the satisfaction of the request or one year from the date below, whichever occurs first.</p>																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%; text-align: center;">Name Of Provider</th> <th style="text-align: center;">Address Of Provider</th> </tr> </thead> <tbody> <tr> <td>TRILLIUM</td> <td>201 W 1ST ST, GREENVILLE NC 27858</td> </tr> <tr> <td>CHERRY HOSPITAL</td> <td>Caller Box 8000, Goldsboro NC 27533/Medical Records-Correspondence</td> </tr> <tr> <td>VIDANT BEHAVIORAL HEALTH</td> <td>1308 Highland Dr, Washington NC 27889</td> </tr> <tr> <td>BC CLERK OF COURT</td> <td>2ND St, Washington NC 27889</td> </tr> <tr> <td>DREAM PROVIDER CARE SRVS</td> <td>216 W Stewart Parkway, Washington NC 27889</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>			Name Of Provider	Address Of Provider	TRILLIUM	201 W 1ST ST, GREENVILLE NC 27858	CHERRY HOSPITAL	Caller Box 8000, Goldsboro NC 27533/Medical Records-Correspondence	VIDANT BEHAVIORAL HEALTH	1308 Highland Dr, Washington NC 27889	BC CLERK OF COURT	2ND St, Washington NC 27889	DREAM PROVIDER CARE SRVS	216 W Stewart Parkway, Washington NC 27889				
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<p>I also request and authorize any and all clerks of superior court of North Carolina to inform the sheriff of this County whether or not the clerk's records contain the record of any involuntary commitment proceeding under Article 5 of Chapter 122C of the General Statutes in which I have been named as a respondent and, if so, to reveal to the sheriff any confidential information in the court files or records of each such proceeding that the sheriff may reasonably require in order to determine whether or not to issue a concealed handgun permit to me. This Release may be treated as a motion in the cause within the meaning of G.S. 122C-54(d) and a clerk may reveal information to the sheriff pursuant to any specific or standing order entered in response to or anticipation of this motion.</p> <p>Any expenses relating to the search, production, copying and certification of a medical or court record pursuant to this Release shall be my responsibility. I authorize the sheriff to photocopy this Release after I sign it, and I authorize any provider to whom a photocopy of this Release is presented to rely on the photocopy as being as effective as the original.</p>																		
SWORN AND SUBSCRIBED TO BEFORE ME		<i>Date</i>																
<i>Date</i>	<i>Signature Of Person Authorized To Administer Oaths</i>	<i>Signature Of Applicant</i>																
<i>Title</i>		SEAL																
<i>Date Commission Expires</i>																		
AOC-SP-914M, New 12/95, © 1997 Administrative Office of the Courts																		

§ 14-415.12. Criteria to qualify for the issuance of a permit.

(a) The sheriff shall issue a permit to an applicant if the applicant qualifies under the following criteria:

- (1) The applicant is a citizen of the United States or has been lawfully admitted for permanent residence as defined in 8 U.S.C. § 1101(a)(20) and has been a resident of the State 30 days or longer immediately preceding the filing of the application.
- (2) The applicant is 21 years of age or older.
- (3) The applicant does not suffer from a physical or mental infirmity that prevents the safe handling of a handgun.
- (4) The applicant has successfully completed an approved firearms safety and training course which involves the actual firing of handguns and instruction in the laws of this State governing the carrying of a concealed handgun and the use of deadly force. The North Carolina Criminal Justice Education and Training Standards Commission shall prepare and publish general guidelines for courses and qualifications of instructors which would satisfy the requirements of this subdivision. An approved course shall be any course which satisfies the requirements of this subdivision and is certified or sponsored by:
 - a. The North Carolina Criminal Justice Education and Training Standards Commission,
 - b. The National Rifle Association, or
 - c. A law enforcement agency, college, private or public institution or organization, or firearms training school, taught by instructors certified by the North Carolina Criminal Justice Education and Training Standards Commission or the National Rifle Association. Every instructor of an approved course shall file a copy of the firearms course description, outline, and proof of certification annually, or upon modification of the course if more frequently, with the North Carolina Criminal Justice Education and Training Standards Commission.
- (5) The applicant is not disqualified under subsection (b) of this section.

(b) The sheriff shall deny a permit to an applicant who:

- (1) Is ineligible to own, possess, or receive a firearm under the provisions of State or federal law.
- (2) Is under indictment or against whom a finding of probable cause exists for a felony.
- (3) Has been adjudicated guilty in any court of a felony, unless: (i) the felony is an offense that pertain to antitrust violations, unfair trade practices, or restraints of trade, or (ii) the person's firearms rights have been restored pursuant to G.S. 14-415.4.
- (4) Is a fugitive from justice.
- (5) Is an unlawful user of, or addicted to marijuana, alcohol, or any depressant, stimulant, or narcotic drug, or any other controlled substance as defined in 21 U.S.C. § 802.
- (6) Is currently or has been previously adjudicated by a court or administratively determined by a governmental agency whose decisions are subject to judicial review to be, lacking mental capacity or mentally ill. Receipt of previous consultative services or outpatient treatment alone shall not disqualify an applicant under this subdivision.
- (7) Is or has been discharged from the Armed Forces of the United States under conditions other than honorable.

- (8) Except as provided in subdivision (8a), (8b), or (8c) of this section, is or has been adjudicated guilty of or received a prayer for judgment continued or suspended sentence for one or more crimes of violence constituting a misdemeanor, including but not limited to, a violation of a misdemeanor under Article 8 of Chapter 14 of the General Statutes except for a violation of G.S. 14-33(a), or a violation of a misdemeanor under G.S. 14-226.1, 14-258.1, 14-269.2, 14-269.3, 14-269.4, 14-269.6, 14-277, 14-277.1, 14-277.2, 14-283 except for a violation involving fireworks exempted under G.S. 14-414, 14-288.2, 14-288.4(a)(1), 14-288.6, 14-288.9, former 14-288.12, former 14-288.13, former 14-288.14, 14-415.21(b), or 14-415.26(d) within three years prior to the date on which the application is submitted.
 - (8a) Is or has been adjudicated guilty of or received a prayer for judgment continued or suspended sentence for one or more crimes of violence constituting a misdemeanor under G.S. 14-33(c)(1), 14-33(c)(2), 14-33(c)(3), 14-33(d), 14-277.3A, 14-318.2, 14-134.3, 50B-4.1, or former G.S. 14-277.3.
 - (8b) Is prohibited from possessing a firearm pursuant to 18 U.S.C. § 922(g) as a result of a conviction of a misdemeanor crime of domestic violence.
 - (8c) Has been adjudicated guilty of or received a prayer for judgment continued or suspended sentence for one or more crimes involving an assault or a threat to assault a law enforcement officer, probation or parole officer, person employed at a State or local detention facility, firefighter, emergency medical technician, medical responder, or emergency department personnel.
 - (9) Has had entry of a prayer for judgment continued for a criminal offense which would disqualify the person from obtaining a concealed handgun permit.
 - (10) Is free on bond or personal recognizance pending trial, appeal, or sentencing for a crime which would disqualify him from obtaining a concealed handgun permit.
 - (11) Has been convicted of an impaired driving offense under G.S. 20-138.1, 20-138.2, or 20-138.3 within three years prior to the date on which the application is submitted.
- (c) An applicant shall not be ineligible to receive a concealed carry permit under subdivision (6) of Subsection (b) of this section because of an adjudication of mental incapacity or illness or an involuntary commitment to mental health services if the individual's rights have been restored under G.S. 14-409.42. (1995, c. 398, s. 1; c. 509, s. 135.3(d); 1997-441, s. 4; 2007-427, s. 5; 2008-210, s. 3(b); 2009-58, s. 1; 2010-108, s. 5; 2011-2, s. 1; 2011-183, s. 16; 2012-12, s. 2(bb); 2013-369, s. 11; 2015-195, ss. 7, 11(l), 17.)