



92 FRANKLIN STREET
BUFFALO, NEW YORK 14202
(716) 858-6600

COUNTY OF ERIE

ERIE COUNTY CLERK'S OFFICE

PISTOL PERMIT DEPARTMENT

REQUEST FOR PERSONAL and/or BUSINESS PROTECTION ON PISTOL PERMIT

STATE OF NEW YORK
SUPREME COURT : COUNTY OF ERIE

IN THE MATTER OF THE FIREARMS LICENSE

-of-

RE: UPGRADE AFFIDAVIT

NAME _____

ADDRESS _____

SOCIAL SECURITY NUMBER _____

I, _____, being duly sworn, deposes and says:

1. I am licensed pistol permit holder since _____, License Number _____.
2. My pistol permit has the following restrictions: Security, Target and Hunting, Business Protection, Home Protection.
[Strike out category which does not apply.]
3. I wish to upgrade my permit to a license to have and carry concealed without restriction. [400.00-2 (f) Penal Law]
4. I have not been arrested and/or convicted of any felony or criminal offense or Vehicle and Traffic violation
(Including DUI, DWI, etc.), other than minor traffic violations since my permit was issued. If any arrest or conviction list: *(IF "NONE", SO STATE)*

5. That since my permit was originally issued I have not been treated for any mental or emotional illness or disease, nor have I been institutionalized, hospitalized or committed to any public or private facility which provides treatment for mental or emotional disease, defect or illness. *(If no treatment, enter "NONE", otherwise specify details)*

6. That since the original date of issuance of my permit, I have had treatment for the following physical illness or disability. (If no treatment, enter "NONE", otherwise specify details)

7. That since the date of original issuance of my permit the following changes in my personal history have occurred (List change of address, employment, marital status).

8. That since the original date of issuance of my permit, I have not been treated for alcohol or drug abuse except (If no treatment, enter "NONE", otherwise specify date, length of treatment, where treated and what condition)

NOTICE: **FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SEC. 210.45 OF THE PENAL LAW AND ARE GROUNDS FOR REVOCATION OF THE FIREARMS LICENSE PURSUANT TO SECTION 400 OF THE PENAL LAW.**

DATE: _____

PRINT NAME

APPLICANT'S SIGNATURE

STATE OF NEW YORK)
COUNTY OF ERIE)

Sworn to before me on this _____ day of _____, 20_____.

NOTARY PUBLIC OR COMMISSIONER OF DEEDS