



Hudson Police Department

APPLICATION FOR NEW/RENEWAL OF A LICENSE TO SELL, RENT, OR LEASE FIREARMS; LICENSE TO SELL AMMUNITION; OR LICENSE TO PERFORM SERVICES AS A GUNSMITH

PLEASE COMPLETE THIS APPLICATION FORM AND ENCLOSE IN A LARGE SEALED ENVELOPE (**DO NOT FOLD**). THE APPLICATION CAN BE DROPPED OFF OR MAILED TO: HUDSON POLICE DEPARTMENT, ATT: FIREARMS LICENSING, 911 MUNICIPAL DRIVE, HUDSON, MA 01749. **DO NOT** MAIL TO THE FIREARMS RECORD BUREAU. *THIS COVER SHEET CAN BE RETAINED BY THE APPLICANT FOR YOUR RECORDS.*

ALONG WITH THIS COMPLETED APPLICATION, PLEASE INCLUDE COPIES OF THE FOLLOWING DOCUMENTS:

Check when completed:

- 1.) BIRTH CERTIFICATE or NATURALIZATION CERTIFICATE
- 2.) DRIVERS LICENSE
- 3.) CERTIFICATE OF MA. APPROVED BASIC FIREARMS SAFETY COURSE or A COPY OF YOUR CURRENT LTC
- 4.) TWO (2) VALID PROOFS OF HUDSON BUSINESS (TAX BILL, UTILITY BILL, LEASE AGREEMENT, ETC.)
- 5.) ****FOR ALL RENEWALS, PLEASE INCLUDE A CHECK ALONG WITH THE APPLICATION MADE OUT TO 'THE TOWN OF HUDSON'.****
- 6.) SCHEDULED INTERVIEW (**NEW ONLY**)

***** RENEWALS** AT THIS TIME WE DO NOT REQUIRE AN INTERVIEW. THE FIREARMS LICENSING OFFICER WILL CONTACT APPLICANTS FOR RENEWALS VIA PHONE IF ANY QUESTIONS ARRISE. FOR ALL **NEW** LICENSES PLEASE GO TO THE FOLLOWING WEBSITE TO SCHEDULE AN INTERVIEW **AFTER** AN APPLICATION HAS BEEN MAILED OR DELIVERED TO THE HUDSON POLICE DEPARTMENT: <https://hudsonma.setmore.com> *******



LICENSE TO SELL, RENT, OR LEASE FIREARMS.....	\$100.00
LICENSE TO SELL AMMUNITION.....	\$100.00
SERVICES AS A GUNSMITH.....	\$100.00
<i>(NO FEE IF APPLYING FOR A LICENSE TO SELL, RENT, OR LEASE FIREARMS AS WELL)</i>	

FOR INQUIRIES, PLEASE CONTACT THE FIREARMS LICENSING OFFICE AT:
PH: 978-562-7122 E-MAIL: MVROOM@TOWNOFHUDSON.ORG

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1. Are you a citizen of the United States? YES NO

If lawful permanent resident alien, give green card number and resident date

	Green Card Number	Resident Since (date)
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If naturalized, give date, place and naturalization number

	Date	Place	Naturalization No.
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2. Have you ever renounced your U.S. citizenship? YES NO

3. What is your age? _____ (You must be 21 to apply for a LTC, 18 to apply for a FID card, or 14 to 17 with submission of a certificate of parent or guardian granting permission to apply for a FID card or FID card – Restricted).

4. Have you ever been arrested or appeared in court as a defendant for any criminal offense? YES NO

5. Are you the subject of any pending criminal charges? YES NO

6. Have you ever been convicted of a felony? YES NO

7. Have you ever been convicted of the unlawful use, possession, or sale of controlled substances as defined in M.G.L. c. 94C, § 1? YES NO

8. Have you ever been convicted of a violent crime or a crime of domestic violence? YES NO

9. Have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child in any state or federal jurisdiction? YES NO

10. Are you now, or have you ever been the subject of a restraining order issued pursuant to M.G.L. c. 209A, or a similar order issued by another jurisdiction? YES NO

11. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction? YES NO

12. Have you ever been committed to any hospital or institution for mental illness, or alcohol or substance abuse? YES NO

13. Has any firearms license issued under the laws of any state or territory ever been suspended, revoked, or denied? YES NO

14. Have you been discharged from the armed forces of the United States under dishonorable conditions? YES NO

15. Have you been the subject of an order of the probate court appointing a guardian or conservator? YES NO

If you answered "YES" to any of the questions 2-15, give details which must include dates, circumstances and location; use a separate sheet of paper if necessary.

Have you ever used or been known by another name?

YES NO

If "YES", provide name and explain: _____

Other than Massachusetts, in what state(s), territory(ies), or jurisdiction(s) have you lived?

NONE

Have you ever held a firearms license in any other state, territory or jurisdiction?

YES NO

If "YES", when, where, and license number? _____

List the name and addresses of two references (as required by your licensing authority)

1. _____
Last Name First Name

Address City/Town State Zip

2. _____
Last Name First Name

Address City/Town State Zip

Reason(s) for requesting the issuance of the license:

WARNING Any person who knowingly files an application containing false information shall be punished by a fine of not less than \$500 nor more than \$1,000 or by imprisonment for not less than 6 months nor more than 2 years in a house of correction, or by both such fine and imprisonment (M.G.L c. 140, §§ 129B(8), 131(h)).

I declare the above facts are true and complete to the best of my knowledge and belief and I understand that any false answer(s) will be just cause for denial or revocation of my license to carry firearms. I understand that filing an application that contains false information is a criminal offense.

Signed under the penalties of perjury this _____ day of _____ month _____ year

Signature of Applicant: _____

PLEASE READ CAREFULLY

Applicants for all classes of firearms licenses shall comply with the following requirements.

1. Applicants are required to fully complete all of the application forms and addendums in this packet before returning it to the dispatch center in person or by mail.
2. All applicants shall submit to background and nationwide record checks which will be done by the firearms licensing officer. One (1) set of fingerprints are required for all first time applicants (to be completed by the licensing official).
3. Applicants shall provide two (2) valid proofs of a business owned in The Town of Hudson. (tax bill, utility bills, lease agreement, corporate or business documents, etc.)
4. Applicants must provide a valid telephone contact number.
5. Before submitting your application, read and fully understand all the questions. Be sure in your own mind that there is nothing in your past that would disqualify you. Remember, if your application is denied the fee is non-refundable. Nationwide record checks are done for every applicant. Juvenile and adult "sealed" records are accessed by licensing authorities when considering applications, including all renewals. If it is determined that you withheld any required information, your application will be denied.
6. An appointment for an interview must be made for a NEW FID/LTC after submitting your application as instructed on the first page at <https://hudsonma.setmore.com>. No appointment is necessary for renewals at this time.
7. **Application fee shall be paid by bank check, postal money order, or personal check and made payable to: "Town of Hudson." This fee must be sent with any RENEWAL applications. The fee maybe sent in or brought to the appointment for NEW applicants.**

Fees: License to Sell, Rent, or Lease Firearms	\$100.00
License to Sell Ammunition	\$100.00
Services as a Gunsmith <i>(No fee if applying for or licensed to sell firearms)</i>	\$100.00

Applicants must follow these instructions carefully. No license will be issued unless all information is accurate and all required documents are completed and submitted as outlined above. All licenses are issued in accordance with the provisions of Massachusetts General Laws.

Signed: _____ this _____ day of _____, 20_____

IMPORTANT INFORMATION

Please read this entire document carefully

If your application is denied, it is usually due to: disqualifying criminal record; false answers to any question(s) on the application or to any question asked by the licensing officer during the interview; criminal information omitted from, or not attached to, the application as required. As a result of enacting the Massachusetts Gun Control Act of 1998, for the purposes of firearms licensing, any and all previous detentions, arrests, court appearances, juvenile adjudications including any “sealed” records, will be accessed and considered in order to determine suitability of all applicants for licenses to carry and possess firearms. After reading this form you will be asked specific questions regarding personal background, past criminal history, etc. You must answer all questions fully and truthfully. **Failure to do so will result in your application being denied.**

***Initial** _____

Question #4 on the application asks: “Have you ever been arrested or appeared in court as a defendant for any criminal offense?” The key word here is “**APPEARED**” – not necessarily arrested. Having been arrested, charged and/or convicted of a crime does not necessarily prohibit someone from getting a license to carry firearms or an FID card. **Failing to report it will result in your application being denied.**

***Initial** _____

Please note that “ever appeared” includes all adult and juvenile court appearances. It does not matter if you were found “not guilty” or “not delinquent,” or if the charges were “dismissed,” or the case was “continued without a finding” (CWOFF), etc. You are required to report it. It does not matter how long ago the incident occurred. You are required to report that you have a “sealed record,” however you are not required to disclose what the offense was. This office will receive notification of any “sealed record” disqualifiers from the Commonwealth. Statements such as “I forgot about it,” or “it was dismissed and I thought it didn’t count,” or “they told me it wouldn’t show up,” or “I was a juvenile when that occurred” **will be considered false statements and will be just cause for denial of your application.**

***Initial** _____

If necessary, you may contact the Massachusetts Criminal History Systems at www.mass.gov/massachusetts-criminal-offender-record-information-cori to learn how to obtain your Massachusetts criminal record check. If there is ANY omission or a FALSE answer is found, **your application will be denied and you may face criminal prosecution.**

If you are denied or revoked for any reason, your application fee **WILL NOT** be refunded.

Signed: _____ this _____ day of _____, 20 _____

FIREARMS LICENSING DIVISION

Addendum to application for a firearms identification (FID) card, license to carry firearms (LTC), machine gun license, ammunition dealer license, firearms dealer and/or gunsmith license or permit to purchase a firearm issued pursuant to M.G.L. c.140 s.129B, s.131, s.131(o), s.122B, s.122 and s.131A, respectively.

APPLICANT – PLEASE ANSWER THE FOLLOWING

Are you now, or have you ever been the subject of any restraining order issued pursuant to M.G.L. c.209A (domestic abuse laws) or any similar order issued here or in any other state, territory or jurisdiction? **Yes** _____ **No** _____

If “Yes” please provide details below of the abuse alleged and; the court of record, docket number, date issued and the date it was vacated or expired, etc.:

Signed: _____ this _____ day of _____, 20____

Were you ever convicted of, or had a criminal case continued without a finding, involving a domestic abuse/violence crime, regardless of whether the offense was a misdemeanor or a felony, pursuant to M.G.L. c.209A (domestic abuse laws), or any similar statute or law from any other state or jurisdiction? **Yes** _____ **No** _____

If "Yes" please provide the following information for each offense:

Location of the court of record for the offense: _____

Date of the final disposition of the case (month/day/year): _____

Docket or case number: _____

Disposition of the offense: _____

Please submit a photocopy of all c209A (or similar) restraining order(s) along with this completed application.

I hereby swear that the above answer(s) are true and complete. I understand that any false answer(s) made herein may be just cause for denial of my application.

Signed: _____ this _____, day of _____, 20 _____

FIREARMS LICENSING DIVISION

Applicant Name: _____

E-MAIL: _____

FFL# (if available): _____

Business Name: _____

Business Address: _____

Business Phone Number: _____

Signed: _____ this _____ day of _____, 20 _____

Division of Firearms Licensing

Lt. Michael Vroom

Phone: 978-562-7122

Fax: 978-568-9660

E-Mail: mvroom@townofhudson.org