Permission to Carry State Owned/Privately Owned Firearm

TO:		DATE:	
FROM:			
TITLE:			
LOCATION:			
This is a reques	st for:		
☐ Permanent assignment of a state-owned firearm			m
[☐ Authorization	to carry/use a privately owned fin	rearm
The privately o	wned firearm t	that I am requesting to carry/us	se is a:
Brand	:	Model Number:	Shot Capacity:
Caliber	:	Barrel Length:	Finish:
Serial Number	:	Date Qualified:	Score:
The state-owne	ed firearm that	I am requesting to carry/use is	s a:
Brand	:	Model Number:	Shot Capacity:
Caliber	:	Barrel Length:	Finish:
Serial Number	:	Date Qualified:	Score:
Employee Signate	ure	Unit	Date
☐ Approved		□Denied	
Steven Harpe, Director			Date
CC: Employ Person Training	nel File		(R 10/23)