Instructions for Transfer In/Out of Pistol Permit

According to the Issuing Officer, a licensee must have a residence in the issuing county. If they do not, they must transfer their pistol license to the county of their current residence.

Licensee must make the request to the issuing county for their records to be transferred to their current county of residence.

Licensee completes the following forms:
1. Application for transfer of Pistol License
2. Confidential Data for Transfer of Pistol License
3. National Instant Background Check Certification
4. Outdoor Sports License (transferring IN only)

The fee for transferring is $5.00

Please make checks payable to the St. Lawrence County Clerk

Thank you
St Lawrence County Clerk's Office
Pistol Permit Section
48 Court Street
Canton, NY 13617
Phone: (315) 379-2237
Fax (315)379-2302

Application for Transfer of Pistol Permit

I, ______________________ hereby certify that I now reside at:

____________________________________________________ and hereby apply to the
County Court of St. Lawrence County for a transfer of my pistol permit records
concerning the following weapons:

____________________________________________________

____________________________________________________

____________________________________________________

To the appropriate office in the county of ________________.

I further certify that I have not been arrested, indicted, or convicted of any criminal
offense since the original license was issued.

Dated: __________

________________________________________
Applicant's Signature

OFFICE INFORMATION:

Pistol License Number: ____________, St Lawrence County
Date of Issuance: ____________
Transfer License Number: ____________, ____________ County
Date of Issuance: ____________

________________________________________
Honorable Tatiana Coffinger,
Acting County Court Judge

Cc: New York State Police, Albany New York
NATIONAL INSTANT CRIMINAL BACKGROUND CHECK CERTIFICATION APPLICATION

The Brady Handgun Violence Protection Act, enacted into law November 30th, 1993, which amends the Gun Control Act of 1968, specifies categories of persons who are prohibited from possessing firearms. Relative to this act, please answer the following questions:

PISTOL PERMIT #: ___________________ DATE ISSUED: ___/___/___

NAME: _______________________________

LAST ___________________ FIRST ___________________ MI ___________________

911 ADDRESS: ________________________________

SOCIAL SECURITY NUMBER (OPTIONAL): ___________ ___________ ___________

DATE OF BIRTH: ___/___/_______ PLACE OF BIRTH: _______________________

HEIGHT: ___________________ WEIGHT: ___________________

RACE: ___________________ SEX: ___________________

HAIR: ___________________ EYE: ___________________

1. Have you ever been convicted of a misdemeanor crime of domestic violence? _____
   If yes, are you the subject of a presently existing court order of protection? _____

2. Are you under indictment for or have been convicted of a felony? _____

3. Are you a fugitive from justice? _____

4. Have you been adjudicated as a mental defective or been committed to a mental institution? _____

5. Are you an illegal user of, or addicted to any controlled substances? _____

6. Are you an alien currently residing illegally in the United States? _____

7. Have you renounced your American Citizenship? _____

8. Have you been dishonorably discharged from the Armed Forces? _____

If you answered yes to any of the above questions, please provide an explanation, including the date, the court, and the state of any convictions or orders of protection in the space below:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Affirmed under the penalty of perjury this _____ day of ___________, 20__.

__________________________
Signature of Applicant
Confidential Data for Transfer of Pistol License

Name of Applicant: ________________________________

Old Address: __________________________________

New Address: __________________________________

Present Occupation: ______________________________

Employed by: __________________________________

Business Address: ________________________________

Nationality: ____________________________________

Social Security #: ________________________________

Date of Birth: _______ Age: ______________________

Height: _______ Weight: _______ Phone #: __________

Has your pistol license ever been revoked/ canceled? ________

Signature: ____________________ Date: ____________
IMPORTANT

Outdoor Sports License
(Carry Concealed with Restrictions)

You have been issued a pistol license to carry a concealed pistol with restrictions. Those restrictions allow you to carry a concealed pistol when:

1) Hunting;
2) Trapping;
3) Target shooting; and
4) Participating in the recreational activities of camping, horseback riding, snowmobiling, ATVing, hiking, canoeing, skiing, snowshoeing, fishing, bird watching, or berry picking on property which you own or have explicit permission to be on, or on property owned by a governmental authority and which is open for such activities. This list is not an exhaustive list of all permitted outdoor sports activities.

This license does authorize possession of a weapon in your home.

This license does not authorize you to carry a concealed pistol on property owned by a governmental authority where possession of a pistol is specifically prohibited.

The restriction limits the occasion and circumstances under which you may carry a concealed pistol.

You may not carry a concealed pistol unless you are engaging in the activity listed as a restriction. You are permitted to carry a concealed pistol while engaging in that activity or while traveling to or from that activity. You are also permitted to carry a concealed pistol when traveling to or from and while attending or visiting any New York State licensed gun dealer’s place of business or any show, convention, or sales display at which a New York State licensed gun dealer is set up.

CARRYING A CONCEALED PISTOL OTHER THAN WHEN INVOLVED IN THE PERMITTED ACTIVITIES IS A VIOLATION OF THE LICENSE RESTRICTIONS AS WELL AS A VIOLATION OF THE PENAL LAW.

I hereby acknowledge the restrictions placed upon me as a result of being issued a carry concealed with restrictions pistol license and I agree to abide by those conditions.

__________________________________________  ______________________________________
Applicants Printed Name  Applicant’s Signature

__________________________________________
Sworn to before me this

day of ____________, 20__

__________________________________________
Applicant’s Address

__________________________________________
Notary Public