



State of Ohio
Application for Temporary Emergency
Concealed Carry Handgun License
 O.R.C. 2923.1213
 Type or Print in Ink

Issuing Agency Use Only	
License #:	_____
Date Issued:	_____
Fee Collected:	_____
Receipt#:	_____

SECTION I.

This application will not be processed unless all applicable questions have been answered and until all required supporting documents as described in division (B)(1)(a) and (b) of Section 2923.1213 of the Ohio Revised Code have been provided and, unless waived, cash, cashier's check, or money order in the amount of the applicable license fee have been submitted. **FEES ARE NONREFUNDABLE.**



SECTION II.

Name of Applicant: _____

	Last	First	Middle		
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Current Physical Address: _____

	Street Address	City	State	Zip	County
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Mailing Address (if different from above): _____

	Street Address	City	State	Zip	County
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Telephone #: _____

	Home	Work	Cell
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Date of Birth: _____ Social Security Number:* _____

E-mail Address: _____

Sex of Applicant: Male Female



Applicant
Photo

Race/National Origin of Applicant: American Indian/ Alaskan Native Asian/Pacific Islander
 Black Hispanic Other White

SECTION III.

Evidence of imminent danger (attach documentation)

- Written documentation prepared by law enforcement, prosecutor or court, government entity or public official (e.g., reports, TPO, CPO) and/or;
- Sworn Affidavit (provided by applicant under threat of perjury)

SECTION IV.

I, _____, attest to the following:

- (1) I am legally living in the United States;
- (2) I am at least 21 years of age;
- (3) I am a resident of county of issuance;
- (4) I have not applied for or received a Temporary Emergency Concealed Carry Handgun License within the last four years;
- (5) I am not a fugitive from justice;
- (6) I am not otherwise prohibited by federal law from possessing a firearm;
- (7) I am not under indictment for, or otherwise charged with, an offense identified in Division (D)(1)(d) of Section 2923.125 of the Ohio Revised Code;
- (8) I have not been convicted of, or pleaded guilty to, an offense and have not been adjudicated a delinquent child for committing an act identified in Division (D)(1)(e) of that section;
- (9) Within three years of the date of this submission, I have not been convicted of, or pleaded guilty to, an offense and have not been adjudicated a delinquent child for committing an act identified in Division (D)(1)(f) of that section;
- (10) Within five years of the date of this submission, I have not been convicted of, pleaded guilty to, or have not been adjudicated a delinquent for committing two or more violations identified in Division (D)(1)(g) of that section;
- (11) Within 10 years of the date of this submission, I have not been convicted of, pleaded guilty to, or have not been adjudicated a delinquent child for committing a violation identified in Division (D)(1)(h) of that section;
- (12) I have not been adjudicated as a mental defective, have not been committed to any mental institution, and am not under adjudication of mental incompetence, and have not been found by a court to be a mentally ill person subject to hospitalization by court order, and I am not an involuntary patient other than one who is a patient only for purposes of observation, as described in Division (D)(1)(i) of that section;

(13) I have not been voluntarily committed to a mental hospital or facility for purposes other than observation, or been found by a court to be unable to manage my own affairs;

(14) I am not currently subject to a civil protection order, a temporary protection order, or a protection order issued by a court of this or any other state, as described in Division (D)(1)(j) of that section;

(15) I have reasonable cause to fear a criminal attack upon myself or a member of my family, such as would justify a prudent person in going armed;

(16) I desire a legal means to carry a concealed handgun for defense of myself, or a member of my family, while engaged in lawful activity, and will carry the concealed handgun in a lawful manner;

(17) FURTHER AFFIANT SAYETH NAUGHT.

Signature of Applicant (witnessed by Notary)

Date

SWORN TO, before me and subscribed in my presence this _____ day of _____,

_____ at _____, County of _____, state of Ohio.

NOTARY PUBLIC

Temporary Emergency Concealed Carry Handgun License is only valid for 90 days from date of issuance and cannot be renewed. A person can only obtain a Temporary Emergency Concealed Carry Handgun License one time during the four-year period after original issue.

TO BE COMPLETED BY THE ISSUING AUTHORITY ONLY

Application received: _____ Date _____ By: _____ Name of Intake Person _____

Application review completed by: _____ Date _____ Application reviewed by: _____ Name of Reviewer _____

Background completed: _____ Date _____ Background records destroyed: _____ Date _____ By: _____ Name _____

Approved date: _____

Denied date: _____ Reason: _____

LEADS entry date: _____ Entry #: _____ By: _____ Name _____

*Certain personal information requested on the application, including an applicant's Social Security number is protected by both Ohio and federal law. Inclusion of a Social Security Number on an application for a concealed weapon license is not required for the application to be processed. Under federal law, the county sheriff may not refuse to process an application for a license if the applicant does not provide a Social Security number. Although voluntary, disclosing a Social Security number greatly facilitates the background checks that must be conducted before a license can be issued.