



# WEAPON RELEASE REQUEST

Pell City Police Department  
205-884-3334  
jfellows@cityofpellcity.net

## APPLICANT

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Race \_\_\_\_\_ Gender \_\_\_\_\_ Social Security No. \_\_\_\_\_

Phone \_\_\_\_\_ Driver's License No. \_\_\_\_\_ State \_\_\_\_\_

Weapon Requesting Returned \_\_\_\_\_

## ACKNOWLEDGEMENT

**As required under Alabama and Federal law, I acknowledge and agree with the following statements:**

- \_\_\_ 1. I am the actual transferee / buyer of the firearm(s) listed on this form. *Warning: You are not the actual transferee / buyer if you are acquiring the firearm(s) on behalf of another person.*
- \_\_\_ 2. I am a lawful or legal immigrant of the United States.
- \_\_\_ 3. I have not been convicted in any court of a misdemeanor crime of domestic violence.
- \_\_\_ 4. I am not under indictment or information in any court for a felony, or any other crime for which the judge could imprison me for more than one year.
- \_\_\_ 5. I have not ever been convicted in any court of a felony, or any other crime for which the judge could have imprisoned me for more than one year, even if I received a shorter sentence including probation.
- \_\_\_ 6. I am not a fugitive from justice.
- \_\_\_ 7. I am not an unlawful user of, or addicted to, marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance. *Warning: The use or possession of marijuana remains unlawful under Federal law regardless of whether it has been legalized or decriminalized for medicinal, or recreational purposes in the state where you reside.*
- \_\_\_ 8. I have not ever been adjudicated as a mental defective OR been committed to a mental institution.
- \_\_\_ 9. I have not been discharged from the Armed Forces under dishonorable conditions.
- \_\_\_ 10. I am not subject to a valid protection order for domestic abuse or a court order restraining me from harassing, stalking, or threatening my child, an intimate partner or child of my partner.

**Under penalty of law, I do hereby certify that I am the lawful owner of the weapon listed on this form and that none of the above disqualifying factors apply to me. By submitting this form, I am also authorizing the Pell City Police Department to conduct a background investigation on my eligibility to possess a firearm lawfully.**

Signature \_\_\_\_\_ Date \_\_\_\_\_