



Ludlow Police Department

612 Chapin Street, Ludlow, MA 01056



MICHAEL N. BRENNAN
Chief of Police

Phone: (413) 583-8305
Fax: (413) 583-8283

ALL FIREARMS APPLICATIONS ARE BY APPOINTMENT ONLY

FOR ALL RENEWAL APPLICATIONS:

1. The completed application form. Must answer all questions and be completed truthfully.
2. Positive identification with proof of residency.
3. A non-refundable application fee in the form of a **MONEY ORDER** or **CERTIFIED BANK CHECK** in the amount of **\$100.00 made payable to "The Town of Ludlow"**. There is no fee for persons over 70 for an LTC/FID renewal.

FOR ALL NEW LTC APPLICANTS:

1. The completed application form. Must answer all questions and be completed truthfully.
2. Positive identification.
3. A copy of the Certification Form from a completed **Basic Firearms Safety Course** certified by the Massachusetts State Police which is specified as valid for License to Carry.
4. A non-refundable application fee in the form of a **MONEY ORDER** or **CERTIFIED BANK CHECK** in the amount of **\$100.00 made payable to "The Town of Ludlow"**.

FOR NEW FID APPLICANTS:

1. The completed application form. Must answer all questions and be completed truthfully.
2. Positive identification
3. A copy of the Certification Form from a completed **Basic Firearms Safety Course** certified by the Massachusetts State Police or a **Basic Hunter Safety Education Certificate** issued by the Commonwealth of Massachusetts Division of Fisheries & Wildlife.
4. A non-refundable **MONEY ORDER** or **CERTIFIED BANK CHECK** in the amount of \$100.00 made payable to **"The Town of Ludlow"**.

FOR NEW MACE AND PEPPER SPRAY ONLY APPLICANTS (under the age of 18*):

1. The completed application.
2. Positive identification.
3. A non-refundable **MONEY ORDER** or **CERTIFIED BANK CHECK** in the amount of **\$25 made payable to "The Town of Ludlow"**. At this time there is no charge for renewing an FID Class D license.

*A Mace and Pepper Spray License is not required for persons over the age of 18.

All applicants will be subjected to a search of their criminal records through the Massachusetts Board of Probation, the State Police, and the FBI. Fingerprints and photographs will be taken by the Ludlow Police Department.

*Per **Massachusetts General Law Ch. 140 s.121F**, convictions of certain offenses (including certain misdemeanors) will prohibit an applicant from obtaining a firearms license.*

Please call the **Records Department** at **413-583-8305 ext. 2217 or 2218** to answer any questions you may have and to **schedule your appointment.**

Respectfully,

Michael N. Brennan
Chief of Police

APPOINTMENT

DATE: _____

TIME: _____



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY

Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150
TEL: 617-660-4600 | TTY: 617-660-4606 | mass.gov/cjis

PD USE ONLY

FTN: _____

LIC #: _____

Submit this form and direct any questions to
your local police department

MASSACHUSETTS RESIDENT LTC/FID/MACHINE GUN APPLICATION
FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY
FIREARMS OR LICENSE TO POSSESS A MACHINE GUN (M.G.L. c. 140, §§ 129B, 131)

CHECK ONE:

☐ New Applicant*

☐ Renewal - Most Recent License to Carry/FID Number: _____

*NOTE: If application is for a first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached, unless exempt by statute. If this is a renewal application, a lost/stolen firearms affidavit must be submitted.

LICENSE APPLICATION TYPE (Check Only One):

- ☐ Firearms Identification Card - Restricted (self-defense spray)
☐ Firearms Identification Card
☐ License to Carry
☐ License to Possess a Machine Gun
☐ Gun Club License (Only the Colonel of the State Police can issue a club license)

EXCEPT FOR SIGNATURE, PRINT OR TYPE ALL REQUESTED INFORMATION:

Last Name		First Name		Middle Name		Suffix	
Residential Address		City		State	Zip Code	Telephone Number	
Mailing Address		City		State	Zip Code	Telephone Number	
Date of Birth		Place of Birth (City, State, Country)					
Mother's First Name		Mother's Maiden Name		Father's First Name		Father's Last Name	
Height	Weight	Build	Complexion	Hair Color		Eye Color	
Occupation			Social Security Number (Optional)			Drivers License Number	
Employed By			Business Address				
City/Town		State	Zip	Telephone Number			

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

- ☐
- YES
- ☐
- NO

Green Card Number

Resident Since (date)

Date _____

Place

Naturalization No.

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐ YES ☐ NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐
- YES
- ☐
- NO

- ☐ YES ☐ NO

- ☐
- YES
- ☐
- NO

- ☐
- 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 a card or license:

☐ Unrestricted ☐ Target & Hunting ☐ Sporting ☐ Employment

Use lines below to indicate the reason(s) you are requesting the license; use a separate sheet of paper if necessary)

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: _____

Massachusetts License to Carry (LTC)/Firearms Identification Card (FID) Affidavit

Complete this form **only** if you are **renewing** your firearms license.

License Holder Name: _____

Current LTC or FID card Number: _____

Please select one:

A. ☐ (No firearm(s) lost or stolen since previous issuance of LTC or FID card)

1. I am renewing a Massachusetts firearms identification (FID) card or license to carry (LTC) firearms.

2. I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last FID card or LTC.

OR

B. ☐ (Firearm(s) reported lost or stolen since previous issuance of LTC or FID card)

1. I am renewing a Massachusetts firearms identification (FID) card or license to carry (LTC) firearms.

2. I have lost one or more firearms or have reported stolen one or more firearms since the renewal or issuance of my last FID card or LTC.

List all lost or stolen firearms below; use additional sheets as necessary.

Lost or Stolen	Date Reported Lost or Stolen	Reported to (Police Dept.)	Type	Make	Model	Serial Number	Case Number

The above information is true and accurate to the best of my knowledge and belief.

SIGNED UNDER THE PENALTIES OF PERJURY:

Signature: _____ Date: _____



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LTC/FID ATTACHMENT

Please carefully review **QUESTION 4** on your application:

“Have you ever appeared in any court as a defendant for any criminal offense (excluding non-criminal traffic offenses)?”

- You do not have to put down non-criminal traffic offenses (e.g. a speeding ticket), but you **MUST** include any and all criminal offenses. The key word in this question is “APPEARED” (not arrested). If you have ever APPEARED in ANY COURT as a Defendant in a criminal matter you must answer “Yes”.
- Having appeared, arrested and/or even convicted of certain misdemeanor crimes may not prohibit you from obtaining a firearms permit. However, **NOT ANSWERING TRUTHFULLY WILL RESULT IN A DENIAL OF YOUR APPLICATION.**
- Understand that “appeared” in Court, includes ALL ADULT AND JUVENILE Court Appearances in ANY COURT. It does not matter what the final disposition was (Dismissed, Continued Without a Finding, etc.), you must truthfully answer “yes” and explain the circumstances on your application as required in the space provided. (**NOTE:** You must provide explanation for any “yes” answers to questions 4-15).
- If you have a SEALED record, please just let us know that the record is sealed. You don’t have to explain further the circumstances. However, all sealed records are reviewed for conviction disqualifiers for firearms licensing.
- We cannot accept “I forgot”; or “I was told that I didn’t have to show-up”; or “that was long ago”, etc. If you cannot remember, request your own CORI check through the Mass. Department of Criminal Justice Services website or call DCJIS at 617-660-4600 to get the form by mail to assist you in providing a truthful answer.

I have reviewed the above-mentioned information and I understand that my application will be denied and I may be prosecuted for perjury if answering untruthfully.

Signature of Acknowledgement

Date

STATE POLICE FINGERPRINT CARD INFORMATION

This information is necessary in order to process your permit. Thank You.

1. Citizenship Number, if applicable: _____
Date of Citizenship: _____
Location: _____

2. Circle One: Married Single Widow Widower Divorced

3. Your Father's Name:

(First) (Middle) (Last).

4. Your Father's Country of Birth: _____

5. Your Mother's Maiden Name:

(First) (Middle) (Last)

6. Your Mother's Country of Birth: _____

7. Your Wife's Maiden Name or Your Husband's Full Name:

(First) (Middle) (Last)

8. Address of Your Spouse: _____
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