

## Pistol / Revolver License Recertification Form (PPB-2) Instructions

### General Instructions:

- Fields highlighted in yellow are required.
- Your county-issued documents may use the terms “pistol permit”, “pistol / revolver license” or “firearms license” to refer to your Pistol/Revolver License.

|  |   |   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
|--|---|---|-----------------|---|--------|------|------|--|----------------------------|--|--|--|--|--|--|--|---|--------|---------------------------------|------|---------------------|--------|------|------|--|-------------------|--|--|--|--|--|--|---|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">                 License Number<br/>                 Date of Issue             </td> <td style="width: 50%; text-align: center; padding: 2px;"> <b>State of New York</b><br/>                 Pistol / Revolver License<br/>                 Recertification Form             </td> <td style="width: 50%; padding: 2px;">                 County of Issue             </td> </tr> </table> <p style="font-size: small;">Have you ever transferred your pistol/revolver license from one county to another? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>         If <b>Yes</b>, provide Original County of Issue: _____</p>   | License Number<br>Date of Issue   | <b>State of New York</b><br>Pistol / Revolver License<br>Recertification Form | County of Issue | <p><b>License Number</b> – This is your pistol/revolver license number which should be printed on your county-issued document.</p> <p><b>Date of Issue</b> - The Date of Issue is the date (or approximate date if unknown) that you were <u>originally</u> issued a pistol / revolver license, not the date that you transferred or amended your license.</p> <p><b>County of Issue</b> – The county that issued the pistol/revolver license that you currently have. This should be printed on your county-issued document.</p> <p><b>Original County of Issue</b> – If you were originally issued your pistol/revolver license in one county and have subsequently transferred your license to another county, check “Yes” and enter the county that originally issued your license.</p> |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
| License Number<br>Date of Issue  | <b>State of New York</b><br>Pistol / Revolver License<br>Recertification Form | County of Issue   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">                 Last Name             </td> <td style="width: 40%; padding: 2px;">                 First Name             </td> <td style="width: 5%; padding: 2px;">                 MI             </td> <td style="width: 5%; padding: 2px;">                 Suffix             </td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> <tr> <td colspan="4" style="padding: 2px;">                 Date of Birth – MM DD YYYY             </td> </tr> <tr> <td style="height: 20px;"></td> <td colspan="3" style="height: 20px;"></td> </tr> <tr> <td style="width: 15%; padding: 2px;">                 NY Driver's License (or NY Non-Driver ID) No.             </td> <td style="width: 5%; padding: 2px;">                 Gender             </td> <td style="width: 15%; padding: 2px;">                 Social Security (Last 4 Digits)             </td> <td style="width: 10%; padding: 2px;">                 Race             </td> <td style="width: 10%; padding: 2px;">                 Height<br/>ft.   in.             </td> <td style="width: 10%; padding: 2px;">                 Weight             </td> <td style="width: 10%; padding: 2px;">                 Eyes             </td> <td style="width: 10%; padding: 2px;">                 Hair             </td> </tr> <tr> <td style="height: 20px;"></td> <td style="text-align: center;">                 X   X   X   X   X             </td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table> | Last Name   | First Name  | MI              | Suffix  |        |      |      |  | Date of Birth – MM DD YYYY |  |  |  |  |  |  |  | NY Driver's License (or NY Non-Driver ID) No. | Gender | Social Security (Last 4 Digits) | Race | Height<br>ft.   in. | Weight | Eyes | Hair |  | X   X   X   X   X |  |  |  |  |  |  | <p><b>Last Name, First Name, Middle Initial (MI)</b> – Must match your New York State Department of Motor Vehicles (DMV) identification. If the name on your county-issued pistol/revolver license does not match your DMV identification, either file an amendment with your county to correct your pistol/revolver license or contact DMV to correct your DMV identification.</p> <p><b>Suffix</b> – Enter Jr, Sr, I, II, III, IV, V if applicable</p> <p><b>Date of Birth</b> – Enter one digit per box in MMDDYYYY format. Example 06071942 for June 7, 1942.</p> <p><b>NY Driver's License (or NY Non-Driver ID) No.</b> – From your DMV identification.</p> <p><b>Gender</b> – M (Male) or F (Female)</p> <p><b>Eyes</b> – Spell out eye color. Abbreviations like GR are ambiguous (ex: GR can be Green or Grey).</p> <p><b>Hair</b> – Spell out hair color. Abbreviations like BL are ambiguous (ex: BL can be Blonde, Black, or Blue).</p> |
| Last Name  | First Name  | MI  | Suffix          |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
|  |   |   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
| Date of Birth – MM DD YYYY   |   |   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
|  |   |   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
| NY Driver's License (or NY Non-Driver ID) No.  | Gender  | Social Security (Last 4 Digits)   | Race            | Height<br>ft.   in.   | Weight | Eyes | Hair |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |
|  | X   X   X   X   X   |   |                 |   |        |      |      |  |                            |  |  |  |  |  |  |  |   |        |                                 |      |                     |        |      |      |  |                   |  |  |  |  |  |  |   |

Physical Address (street, city, state, zip)

Mailing Address (if different)

Primary Contact Telephone Number  
( )

Email Address (optional)

Since being issued a pistol/revolver license, have you ever been known by any name other than that currently appearing on your license?  Yes  No  
If **Yes**, furnish the following information:

Other Last Name

Other First Name

MI

**Physical Address** – This must be your residential/home address. Do not enter a P.O. box here.

**LICENSE TYPE:**  Carry Concealed (includes restricted or unrestricted)  \*Possess on Premises  \*Possess/Carry During Employment  
(\* ) Premise Address or Employer/Employer Address must be provided below:

Employer Name (if Carry During Employment)

Street, City, Zip Code

**License Type** – Many counties print this on the county-issued document. Most licenses are “Carry Concealed”. Only check one box.

**Employer Name** - Only required if License Type is “Possess/Carry During Employment”.

**Employer/Premise Address** - Only required if License Type is “Possess on Premises” or “Possess/Carry During Employment”.

**FIREARM DATA:**

Do you have any pistols and/or revolvers listed on your pistol/revolver license (includes possessed, co-owned/co-registered)?  Yes  No  
If **Yes**, furnish the following information: (See reverse if additional space is needed)

| Co-Registered            | Manufacturer | Pistol/Revolver/<br>Single Shot | Model | Frame<br>Only            | Caliber(s) | Serial Number |
|--------------------------|--------------|---------------------------------|-------|--------------------------|------------|---------------|
| <input type="checkbox"/> |              |                                 |       | <input type="checkbox"/> |            |               |
| <input type="checkbox"/> |              |                                 |       | <input type="checkbox"/> |            |               |

Complete all required fields for all firearms listed on your pistol/revolver license (includes possessed and co-owned/co-registered). Additional firearms should be recorded on the back of the PPB-2 and/or the PPB-2A. Check “No” if you do not currently have any pistols or revolvers listed on your pistol/revolver license.

**Co-Registered** – Check this box if the firearm is also listed on another person’s permit.

**Manufacturer** –Ex: Ruger, Smith & Wesson. Sometimes referred to as “Make” on county documents.

**Pistol/Revolver/Single Shot** –Valid values are Pistol, Revolver, or Single Shot. Do not enter other values in this column.

**Model** – Provide if available. If printed on county-issued document, enter as shown on that document.

**Frame Only** – Check this box if you possess only the frame of the firearm. *If your Firearm is fully functioning, do not check this box.*

**Caliber(s)** – Required unless Frame Only. Provide all calibers associated with this firearm.

**Serial Number** – Provide firearm serial number.

**NYS FIREARMS LICENSE RECERTIFICATION - REQUEST FOR PUBLIC RECORDS EXEMPTION**

If you would like to request that your firearms license recertification records be exempt from public disclosure, you **MUST** check a box from the choices below.

1. My life or safety may be endangered by disclosure because:  
 A. I am an active or retired police officer, peace officer, probation officer, parole officer, or corrections officer;  
 B. I am a protected person under a currently valid order of protection;  
 C. I am or was a witness in a criminal proceeding involving a criminal charge;  
 D. I am participating or previously participated as a juror in a criminal proceeding, or am or was a member of a grand jury;
2.  My life or safety or that of my spouse, domestic partner or household member may be endangered by disclosure for some other reason explained below: *(Must be explained in additional supportive information below)*
3.  I am a spouse, domestic partner or household member of a person identified in A, B, C or D of question 1.  
*(Please check any that apply)*  
A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ D \_\_\_\_\_
4.  I have reason to believe that I may be subject to unwarranted harassment upon disclosure.  
*(Please provide any additional supportive information as necessary)* \_\_\_\_\_  
\_\_\_\_\_

Complete this section to request that your recertification information **NOT** be released publicly.

Check the box or boxes that best describe the reason(s) your information should not be publicly disclosed. **You must choose a reason from #1 - #4.**

If reason #2 is chosen, you must explain in the additional supportive information space provided at the bottom of this section.

I certify that the information provided on both sides of this form is correct. I also hereby affirm that, to the best of my knowledge, I am not prohibited from possessing firearms. I understand that false statements made herein are punishable as a Class A misdemeanor. I further understand that upon discovery that I provided any false information, I may be subject to criminal penalties, my pistol / revolver license may be revoked, and any request for public records exemption shall become null and void.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

*Mail to: New York State Police, Pistol Permit Bureau, Building 22, 1220 Washington Avenue, Albany, New York 12226-2252*

Review the affirmation paragraph.

Sign and date the form.

If PPB-2A (additional firearms form) was used, it must also be signed and dated.

Mail to address shown.