



New York State Police

ACQUISITION OR DISPOSITION OF FIREARMS BY POLICE OFFICERS AND PEACE OFFICERS

In accordance with the Federal Privacy Act of 1974, you are hereby notified that your Social Security Number is not mandated by law. It is required by the Pistol Permit Bureau as part of the standard for recording Firearms. Failure to disclose your Social Security Number will prohibit your transaction from being recorded. The State Police will release your Social Security Number only for reasons required by law or with your written consent.

INSTRUCTIONS ON REVERSE SIDE

1 PERSONAL DATA			
NAME OF POLICE OFFICER OR PEACE OFFICER (LAST, FIRST, MI)		STREET ADDRESS	
DATE OF BIRTH	SOCIAL SECURITY NUMBER	C-T-V, STATE, ZIP CODE	COUNTY
NAME OF EMPLOYER (AGENCY)		AGENCY ADDRESS	
AGENCY ORI #		C-T-V, STATE, ZIP CODE	COUNTY
CHECK ONE: I AM EMPLOYED AS A POLICE OFFICER PEACE OFFICER		TITLE OR RANK	SHIELD OR BADGE NO.
2 TRANSACTION DATA			
CHECK ONE BOX ONLY AND ENTER THE EFFECTIVE DATE:			
THIS FORM REPORTS:		ACQUISITION OF A FIREARM – DATE OF ACQUISITION	<input style="width: 100px; height: 20px;" type="text"/>
		DISPOSITION OF A FIREARM – DATE OF DISPOSITION	<input style="width: 100px; height: 20px;" type="text"/>
NAME OF OTHER PARTY THAT FIREARM WAS ACQUIRED FROM OR TO WHOM IT WILL BE DISPOSED:		STREET ADDRESS	
DATE OF BIRTH	SOCIAL SECURITY NUMBER	C-T-V, STATE, ZIP CODE	COUNTY
IF ACQUISITION, UNDER WHAT AUTHORITY DID OTHER PERSON POSSESS WEAPON? (CHECK ONLY ONE BOX) IF DISPOSITION, UNDER WHAT AUTHORITY WILL OTHER PARTY POSSESS WEAPON? (CHECK ONLY ONE BOX)			
POLICE OFFICER	_____ NAME OF EMPLOYER OR AGENCY	PISTOL LICENSE	_____ COUNTY WHERE ISSUED
PEACE OFFICER	_____ NAME OF EMPLOYER OR AGENCY	NY LICENSED DEALER	_____ COUNTY WHERE ISSUED
BUSINESS NAME OF NYS DEALER PERFORMING NICS CHECK			
3 FIREARMS INFORMATION			
MAKE		MODEL	
CALIBER	SERIAL NUMBER	TYPE (CHECK ONE) PISTOL REVOLVER OTHER:	
4 CERTIFICATION			
I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND IS BEING SUBMITTED AS REQUIRED BY LAW			DATE
/S/ _____ SIGNATURE OF POLICE OFFICER OR PEACE OFFICER SUBMITTING FORM			
5 AGENCY ENDORSEMENT			
NAME OF AGENCY REPRESENTATIVE		TITLE OR RANK OF AGENCY REPRESENTATIVE	
SIGNATURE OF AGENCY REPRESENTATIVE /S/ _____		DATE OF ENDORSEMENT	

POLICE OFFICER OR PEACE OFFICER

- Use this Form to report the acquisition or the disposition of a firearm or machine gun by a police officer or peace officer. A firearm is any pistol, revolver, short barreled shotgun, short barreled rifle or machine gun as defined by Penal Law section 265.00.
- For private sales, an approved National Instant Criminal Background Check (NICS) must be completed on the buyer before transaction can be completed. NICS checks are performed by participating New York State Firearms dealers.
- Use one Form for each firearm or machine gun that you acquire or dispose of.
- Except for signatures, type or clearly print all entries.
- Complete boxes 1 through 4. In box 2 check the appropriate square that indicates whether the firearm has been recently acquired or disposed of. If this is an acquisition – Report the legal status under which the previous owner possesses this firearm. If this is a disposition – Report the legal status under which the new owner possesses this firearm.
- After thoroughly completing the appropriate boxes, submit the Form to your supervisor or agency representative within 10 days of acquisition or disposition.

AGENCY REPRESENTATIVE

- When you receive the completed Form, review the Form for accuracy, then complete box 5 – Agency Endorsement on the bottom of the Form.
- E-mail form to pistolpt@troopers.ny.gov or Mail to: Pistol Permit Unit
New York State Police
Building 22
1220 Washington Ave
Albany, New York 12226-2252