## **NYS Firearms License Request for Public Records Exemption**

Pursuant to section 400.00 (5) (b) of the NYS Penal Law

v <b>licensed</b> to possess a firearm in NYS				
Date of Birth				
tyState				
Date Issued				
Licensing Authority / County of Issuance or Application				
i				

I hereby request that any information concerning my firearms license application or firearms license not be a public record. The grounds for which I believe my information should **NOT** be publicly disclosed are as follows: (*check all that are applicable*)

[] 1. My life or safety may be endangered by disclosure because:

[	]	А.	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;	
[	]	С	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;	
My life or safety or that of my spouse, domestic partner or household member may be endangered by				

- [ ] 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 item 5 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.

5. (Please provide any additional supportive information as necessary)

I understand that false statements made herein are punishable as a class A misdemeanor. I further understand that upon discovery that I knowingly provided any false information, I may be subject to criminal penalties and that this request for an exemption shall become null and void.

Signature