

**APPENDIX 14**  
**FIREARM APPLICANT INVESTIGATION REPORT - PAGE 2**

\_\_\_\_\_  
(Print Applicant's Name)

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Current Address)

\_\_\_\_\_  
(Date of Residency)

List all complete addresses for the past five (5) years; **if not applicable, please indicate here [ ]**.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Local Police Department Check**

Department: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Date Contacted: \_\_\_\_\_ Phone #: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Department: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Date Contacted: \_\_\_\_\_ Phone #: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Department: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Date Contacted: \_\_\_\_\_ Phone #: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INVESTIGATION  
FIREARMS APPLICATION AND PERMIT TO PURCHASE  
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