



THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE
OF PUBLIC SAFETY AND SECURITY
Department of Criminal Justice Information Services
Firearms Records Bureau
617.660.4782 · mass.gov/firearms-services

Non-Resident Temporary License to Carry Firearms – INFORMATION AND INSTRUCTIONS

- You can now apply online for a Massachusetts firearms license:
<https://www.mass.gov/how-to/apply-for-or-renew-a-firearms-license>
- Every applicant is required to appear in-person at the Firearms Records Bureau (FRB) for the first non-resident license to carry (LTC) application.
- Renewals will not require an in-person appearance, except at the discretion of the FRB. **You will still need to renew your LTC annually**, either online or through the mail.
- Licenses are valid for 1 year (no grace period) unless issued for employment (see #5 below).
- *Applicants should apply for renewal a minimum of 90 days in advance.*
- Walk-in service is not available.

Application Instructions and Requirements:

A mistake on the application or omission of required documentation will result in a delay in issuance or a denial of the application.

1. **Fee:** \$100.00 (non-refundable). Only bank checks or postal money orders made payable to "Commonwealth of Massachusetts" are accepted. *Cash, personal checks, or business checks will be returned.* Applications received electronically will be given an option to pay online.
2. **Firearms Safety Course:** First-time applicants are required to submit a copy of a Massachusetts Basic Firearms Safety Course certificate. **This course must have been taken with an instructor who is certified by the Colonel of the Massachusetts State Police** (*ask your instructor prior to taking the course if he is certified in Massachusetts*).

A current list of acceptable courses and a roster of certified instructors are available by searching here:
<https://www.mass.gov/info-details/firearms-safety-instructors-certification-program>

A safety course or certificate is **not** required if you held a Massachusetts resident or non-resident LTC on or after June 1, 1998.

3. **Immigration Documentation:**
Permanent residents (green card holders): enclose a photocopy of your immigration card and passport.

Naturalized citizens: include your alien registration number (ARN) *and* the number on the naturalization certificate (or a copy of your naturalization certificate) or a copy of your US Passport.
4. **Home Address:** All applicants must include a valid residential address. *P.O. Box numbers are only accepted for mailing address.*
5. **Applications Submitted for Employment Purposes, valid for two years:** Military personnel who are stationed within the territorial boundaries of the Commonwealth or persons employed by a bank, public utility corporation, a firm engaged in the business of transferring money, or a firm licensed as a private detective agency may apply for a license which may be valid for two years. To qualify:

- Military personnel must submit a photocopy of their military ID and have written consent from their commanding officer.
- Private detective agencies must be licensed in the Commonwealth under the provisions of M.G.L. c. 147, as a private detective agency, guard or patrol. A photocopy of the company's Massachusetts license must accompany the application.
- Persons employed by a bank, public utility corporation, a firm engaged in the business of transferring money, or a firm licensed in Massachusetts as a private detective agency, must have the application endorsed by his/her employer by submitting a letter from their employer *on company letterhead* indicating his or her current employment.

6. **Self-addressed, stamped envelope** to mail the completed license.

Mail the completed package to:

**Massachusetts Department of Criminal Justice Information Services
Firearms Records Bureau
200 Arlington Street
Chelsea, MA 02150**



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FRB USE ONLY

FTN: _____

LIC #: _____

LICENSE APPLICATION

NON-RESIDENT TEMPORARY LICENSE TO CARRY

CHECK ONE:

☐ New Applicant (you must attach a copy of your Massachusetts Basic Firearms Safety Course certificate or previous Massachusetts LTC or FID)

☐ Renewal - Previous License to Carry Number: _____

FOR FIRST TIME APPLICANTS, INDICATE IF YOU WOULD LIKE YOUR IN-PERSON APPOINTMENT DATE EMAILED:

☐ YES (email address): _____

☐ NO (you will receive a notice in the mail)

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) Email address

Mother's First Name Mother's Maiden Name Father's First Name Father's Last Name

Height Weight Gender Race Ethnicity Hair Color Eye Color

Occupation Social Security Number (Optional) Drivers License Number

Employed By Business Address

City/own State Zip Telephone Number

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1. Are you a citizen of the United States?
☐ YES ☐ NO

If lawful permanent resident alien, give
green card number and resident date

Green Card Number

Resident Since (date)

If naturalized, give date, place
and naturalization number

Date

Place

Naturalization No.

2. What is your age? _____
3. Have you ever been arrested, summonsed, or appeared in court as a defendant for any criminal offense?
☐ YES ☐ NO
4. Are you the subject of any pending criminal charges?
☐ YES ☐ NO
5. Have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child in any state or federal jurisdiction?
☐ YES ☐ NO
6. Have you ever been the subject of a restraining order or criminal harassment order issued by a Massachusetts court or by a court in another jurisdiction?
☐ YES ☐ NO
7. Have you ever been committed by a court to a hospital for mental illness, or alcohol or substance abuse?
☐ YES ☐ NO
8. Has any firearms license issued to you by any state or territory ever been suspended, revoked, or denied?
☐ YES ☐ NO
9. Have you been dishonorably discharged from the armed forces of the United States?
☐ YES ☐ NO
10. Have you ever been the subject of an order of any court appointing a guardian or conservator?
☐ 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 your home state, 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", please indicate which state(s): _____

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 _____
date month year

Signature of Applicant: _____

Employment or Military Use Only:

Signature/Endorsement of Employer or Commanding Officer

Rank or Title

NOTE CHANGE OF ADDRESS REQUIREMENT: FAILURE BY A NON-RESIDENT LTC HOLDER TO SUBMIT A CHANGE OF ADDRESS THROUGH THE UNIFIED GUN PORTAL WITHIN THIRTY (30) DAYS OF ITS OCCURRENCE MAY RESULT IN REVOCATION OR SUSPENSION. <https://gunportal.mass.gov/mircsUnifiedPortal/>

Massachusetts Firearms License Affidavit (applies to renewals for all license types)

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

License Holder Name: _____

Current Firearms License Number: _____

Please select one:

A. ☐ No firearm(s) lost or stolen since previous issuance of firearms license

1. I am renewing my Massachusetts firearms license.
2. I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last license.

OR

B. ☐ Firearm(s) reported lost or stolen since previous issuance of firearms license

1. I am renewing my Massachusetts firearms license.
2. I have lost one or more firearms or have reported stolen one or more firearms since the renewal or issuance of my last license.

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: _____

PRIVACY ACT STATEMENT – CIVIL FINGERPRINTING

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub.

L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Applicant Notification and Record Challenge

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>.