

TOWN OF BETHLEHEM

David VanLuven
Town Supervisor

Gina F. Cocchiara
Chief of Police

Albany County - New York
POLICE DEPARTMENT
447 DELAWARE AVENUE
DELMAR, NEW YORK 12054
(518) 439-9973
Fax: (518) 439-6965



Reference Name: _____

An application for a Pistol Permit has been filed with this department by:

Applicant Name: _____

Applicant Address: _____

The application indicates that you have signed as a character reference for the applicant. Under the provisions of Section 400.00(4) of the New York State Penal Law, this department is required to conduct a background investigation of the applicant

Please respond to the following questions.

Does the applicant reside at the indicated address? _____

How long have you known the applicant? _____

Do you recommend the issuance of the permit requested? _____

Has the applicant ever been arrested, indicted or convicted anywhere for any offense except traffic violations? _____

Has the applicant undergone treatment for alcohol or drug abuse? _____

Has the applicant suffered mental illness or been confined to any hospital, public or private institution for mental illness? _____

Does the applicant have any physical impairment that would interfere with the safe and proper use of a handgun? _____

Has the applicant ever been charged, petitioned against, a respondent, or otherwise been a subject of a proceeding in family court? _____

Is there any reason why the applicant should not be issued the permit requested? _____

New York State Accredited Agency Since 1990

Visit the Town of Bethlehem Website at <http://www.townofbethlehem.org>

THIS FORM MUST BE PRINTED DOUBLE SIDED

(Over)

In answering any of the previous questions, if additional space is required, indicate the number of the question and use this space to answer them.

In the space below, give a brief description of the applicant's character as you personally know it.

Reference's name: (print): _____

Reference's address: _____

Reference's date of birth: _____

Telephone numbers:
Include area codes

Cell: _____

Home: _____

Work: _____

Reference signature: _____

Date: _____

The information provided will be used solely to determine the applicant's eligibility for issuance of the permit requested.

False statements are punishable as a crime pursuant to Section 210.45 and 175.35 of the New York State Penal Law.