

STATE OF ALASKA

DEPARTMENT OF PUBLIC SAFETY



RENEWAL

of a

CONCEALED HANDGUN PERMIT

This packet contains:

- General information and instructions
- Application for **renewal** of a concealed handgun permit
- Photograph specifications and instructions

Direct inquiries to:

Department of Public Safety, Division of Statewide Services

Permits and Licensing Unit

5700 East Tudor Road, Anchorage, Alaska 99507

Telephone (907) 269-0392

<http://www.dps.state.ak.us/PermitsLicensing/achp/>

Special Notice:

The Federal Bureau of Investigation (FBI) has informed the Department of Public Safety that effective June 1, 2006, they will no longer complete National Instant Check System (NICS) checks subsequent to the processing of fingerprint cards for the purposes of obtaining an Alaska Concealed Handgun Permit (AHP).

This means that Concealed Handgun Permits issued after June 1, 2006 will contain the notation "NOT NICS EXEMPT", and a permit holder will be required to undergo a NICS background check at the time of any firearm purchase.

Permits issued prior to June 1, 2006 and indicating "NICS EXEMPT" may still be used in lieu of the permit holder undergoing a NICS check at the time of a firearm purchase, for the life of the permit.

We have requested that the FBI reconsider this decision; should they do so, we will once again be able to issue "NICS EXEMPT" Alaska Concealed Handgun Permits.

The Department of Public Safety will not accept the submission of fingerprints for AHP renewals after June 1, 2006. However, state law still requires a fingerprint based background check prior to the issuance of a new concealed handgun permit.

GENERAL INFORMATION - Retain for your files

1. ALASKA CONCEALED HANDGUN PERMIT RENEWAL

You may not apply to renew your concealed handgun permit sooner than 90 days before the expiration of your permit.

By submitting a **renewal** application for your concealed handgun permit, you acknowledge you have read and understand the laws and regulations relating to carrying a concealed handgun (Alaska Statutes (AS 18.65.700 -- AS 18.65.790) and Alaska Administrative Regulations (13 AAC 30.010 -- 13 AAC 30.900)).

2. ADDRESS, RESIDENCE, AND TELEPHONE INFORMATION

The permit holder must be a resident of Alaska. You are required to list a residence address on the application and may not use a post office box, mail drop, or lot and block number. Your residence address is your street number and name, apartment number, city, and zip code. In outlying areas, provide a brief description of your physical address, e.g., Village Road, fourth house on the left next to boat ramp. **Reminder: AS 18.65.765(a)(1) states the holder of a permit shall notify the department of a change in the permit holder's address within 30 days.**

Telephone number - If there is a correctable problem on your application, we can save processing time if you list a daytime telephone number.

3. DEFINITION OF "CONVICTION"

13 AAC 30.900(6) defines "conviction" as it applies to qualifications that must be met for an individual to possess a Concealed Handgun Permit. It states: "(6) "convicted" or "conviction" means that a person has entered a plea of guilty or no contest to, or has been found guilty by a court or jury of, a criminal offense, **regardless of whether the judgment was after that set aside** under AS 12.55.085 or a similar procedure in another jurisdiction, or was the subject of a pardon or other executive clemency, but does not include a judgment that has been reversed or vacated by a court as a result of motion, appellate action, petition for writ of habeas corpus, or application for post-conviction relief under Rule 35.1 of the Alaska Rules of Criminal Procedure or a similar procedure in another jurisdiction."

4. FEES

Submit the \$25 **non-refundable** renewal fee with your application. A permit submitted on or after the expiration date will be assessed a \$25 late fee. You may pay the fee with a personal check, cashier's check, or money order payable to *State of Alaska*. **DO NOT SEND CASH THROUGH THE MAIL.**

5. PERMITS EXPIRED MORE THAN 60 DAYS

The department will **not** accept a renewal for a permit submitted more than 60 days after the expiration date of the permit. Nothing prohibits the holder of an expired permit from applying for a new permit.

6. RE-CERTIFICATION TRAINING is not required to renew your concealed handgun permit.

7. FINGERPRINTS are not required to renew your concealed handgun permit.

8. PHOTOGRAPH

Include **one quality color photograph** taken within the 30 days preceding the date you apply for renewal. **See the Photograph Instructions and Specifications in this packet for specific information.**

9. RENEWAL PROCESS - Review your application and photograph **before** you submit them. **Failure to submit a properly completed application and attachments will result in a delay in processing your renewal.**

Apply to renew your concealed handgun permit by mail. You are not required to apply in person.

- (a) Mail application to the Permits and Licensing Unit, 5700 East Tudor Road, Anchorage, Alaska 99507, **postmarked** not more than **90 days before** or **60 days after** your concealed handgun permit expires (renewal applications postmarked on or after the permit expiration date are subject to a \$25 late fee);
- (b) If you want to receive a copy of the receipt information, make a copy of the application and include it **and** a self addressed stamped envelope; and
- (c) Include your completed renewal application, photograph, \$25 renewal fee, and \$25 late fee (if applicable).

You may apply in person only if you cannot mail your renewal application to the Permits and Licensing Unit.

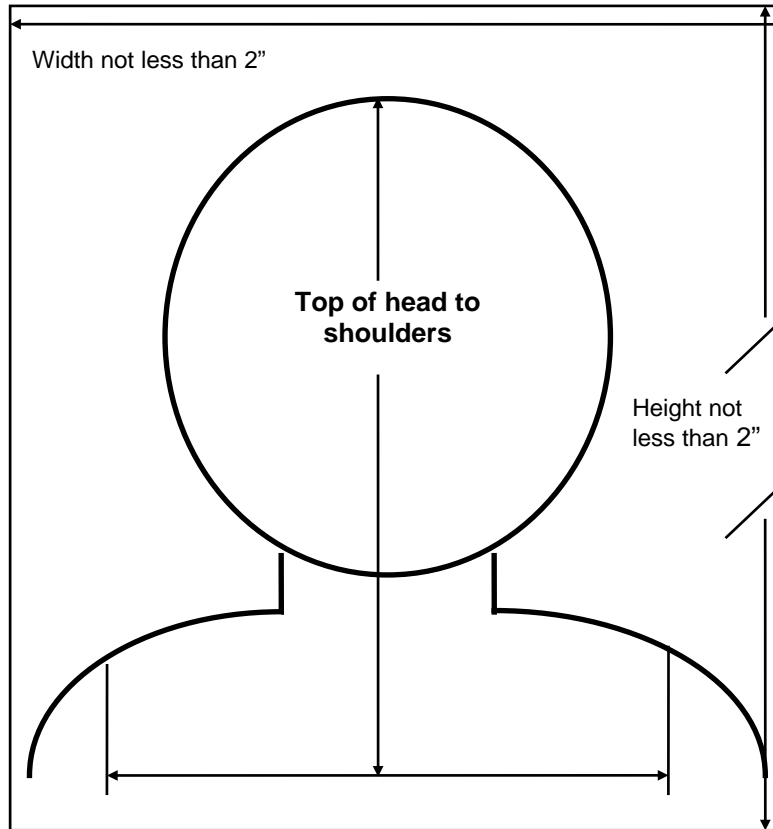
- (a) If you want the receipt information completed on your copy, make a copy of the application **before** you submit it and take the copy with you; and
- (b) Take your completed renewal application, photograph, and fee(s) to an office of the Alaska State Troopers.

10. TERM OF RENEWAL PERMIT - expires on the person's birthday in the fifth year following issuance of the permit. The department may adjust the length of an initial permit so that a permit is not issued for a period of more than five years.

PHOTOGRAPH INSTRUCTIONS AND SPECIFICATIONS

INSTRUCTIONS:

1. Take photograph within 30 days of the date of the application.
2. Print applicant's name, date photograph was taken, and Alaska Driver's License or Identification Card number on the **back** of the photograph.



SPECIFICATIONS:

1. Uncut (not trimmed), rectangular, color photograph including the top of the subject's head to the shoulders (computer disc from a digital camera is acceptable – format must be .BMP, .DIB, .TGA, .TIF, .PCX, .GIF, .WPG, .JPG, .CMP, and .PCD).
2. Outer dimension of the photograph is **not less than 2 inches** wide by 2 inches high (passport photographs are acceptable).
3. Photograph of applicant is full frontal view **including head and shoulders only**.
4. Background is very light or white with no fancy backdrop or lettering behind subject.
5. Image is **sharp** and **correctly exposed**, not retouched.
6. Photograph lies flat, is not stained, cracked, or mutilated; is not pasted on a card or mounted in any way.
7. Group pictures and full-length portraits are **not** acceptable.
8. Photograph of applicant in a hat or sunglasses is **not** acceptable.

IMPORTANT NOTE: Failure to submit photograph as specified will delay processing

ALASKA DEPARTMENT OF PUBLIC SAFETY Division of Statewide Services	RENEWAL OF A CONCEALED HANDGUN PERMIT Please type or print using <i>black ink</i>	Do not write in this space
This renewal application will <u>not</u> be processed unless all applicable questions are answered and the required fee(s) and photograph accompany the application. THE RENEWAL FEE IS NON-REFUNDABLE.		

Section I.

ALASKA DRIVERS LICENSE OR IDENTIFICATION NUMBER		Department use only APSIN NUMBER		DATE OF BIRTH		PERMIT EXPIRATION DATE	
FIRST NAME			MIDDLE NAME <small>(NMN if no middle name or MIO if initial only)</small>		LAST NAME		SUFFIX <small>(JR, SR, II, III)</small>
HEIGHT <small>FT. IN.</small>	WEIGHT	HAIR COLOR	EYE COLOR	RACE	GENDER	DAYTIME TELEPHONE NUMBER <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
MAILING ADDRESS				CITY		STATE	ZIP CODE
RESIDENCE ADDRESS (IF DIFFERENT THAN ABOVE)				CITY		STATE	ZIP CODE
CITIZENSHIP (INDICATE COUNTRY) Note: If you are not an U.S. Citizen and you request a NICS check, you must complete Section V of this application.							

Section II. Has there been any change in the information submitted on your original application? Yes No
 If you answered "Yes" explain below and if necessary, attach a signed statement with an explanation. Include copies of judgments, charging documents, military discharge documents, or any paperwork that will allow the department to determine whether you meet the requirements of AS 18.65.705.

Section III.

<p>WARNING: SUPPLYING A FALSE STATEMENT, ANSWER, OR DOCUMENT THE APPLICANT DOES NOT BELIEVE TO BE TRUE MAY SUBJECT THE APPLICANT TO CRIMINAL PROSECUTION FOR UNSWORN FALSIFICATION UNDER ALASKA STATUTE 11.56.210. IF FOUND GUILTY, THE APPLICANT MAY BE PUNISHED FOR VIOLATION OF A CLASS A MISDEMEANOR, AND IN SUCH CASES THE PERMIT WILL BE REVOKED AND THE APPLICANT MAY BE BARRED FROM ANY FURTHER APPLICATION FOR A PERMIT.</p> <p>I HEREBY STATE UNDER PENALTY OF LAW THAT:</p> <ol style="list-style-type: none"> I have read AS 18.65.705 and still qualify for a concealed handgun permit; I want to renew my permit to carry a concealed handgun for lawful purposes, which may include self-defense; The information in this application and any documents submitted with this application is true, correct, and complete to the best of my knowledge and belief; and I understand a permit eligibility investigation will be conducted as part of the application process; this may involve computerized records searches and I authorize the investigation. 	
Date _____	Signature of applicant _____
	Full name (clearly printed or typed) _____

FOR DEPARTMENT USE ONLY

RECEIPT FOR FEES PAID	
The applicant whose name appears above paid the sum of \$ _____ by:	
<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK No. _____
<input type="checkbox"/> MONEY ORDER No. _____	
Signature of employee accepting application _____	Printed or typed name of employee accepting application _____
Date _____	AST office _____

Must be completed by all non-U.S. Citizens

FIRST NAME		MIDDLE NAME (NMN if no middle name or MIO if initial only)			LAST NAME		SUFFIX (JR, SR, II, III)
HEIGHT FT. IN.	WEIGHT	HAIR COLOR	EYE COLOR	RACE	GENDER	STATE OF RESIDENCE	
COUNTRY OF CITIZENSHIP		ALIEN OR I-94 REGISTRATION NUMBER		ARE YOU A NON-IMMIGRANT?) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been a resident for at least 90 days?		<input type="checkbox"/> Yes <input type="checkbox"/> No (You MUST provide a copy of supporting documentation)					
NON-IMMIGRANT/ALIEN EXCEPTION: <input type="checkbox"/> Yes <input type="checkbox"/> No Check the exception if you choose 'YES'. You MUST provide a copy of supporting documentation:							
<input type="checkbox"/> Valid Hunting License/Permit		<input type="checkbox"/> Official Representative of Foreign Government			<input type="checkbox"/> Foreign Gov't Official/Distinguished Visitor		
<input type="checkbox"/> Foreign Law Enforcement Officer		<input type="checkbox"/> Waiver from Prohibition			<input type="checkbox"/> Other (describe)		