
**DEPARTMENTAL AND INTER-DEPARTMENTAL
CORRESPONDENCE**

City of Springfield

GO:	19-006B	DATE: 07/12/22
TO:	ALL COMMANDING OFFICERS	
CC:	DEPUTY CHIEF WILLIAM COCHRANE DEPUTY CHIEF STEVEN KENT DEPUTY CHIEF RUPERT DANIEL SENIOR CAPTAIN TRENT DUDA	
SUBJECT:	LICENSE TO CARRY FIREARMS APPLICATION REQUIREMENTS	

I. POLICY

- A. It shall be the policy of the Springfield Police Department to issue Licenses to Carry Firearms (LTC) in such a manner that the safety of the public and the licensees are protected.
- B. The criteria in this policy are intended to provide LTC applicants with an informed expectation of the likelihood of obtaining an LTC.

II. GENERAL GUIDELINES

- A. In order to ensure such safety, the department shall issue said permits in strict accordance with Massachusetts General Laws, (MGL) c. 140, § 131. Per Mass. Gen. Laws c. 140 § 131, the Police Superintendent is the licensing authority for the City of Springfield and is granted discretionary authority in the issuance of said licenses upon the determination of being "suitable" and not a "prohibited" person. Furthermore, the Superintendent of the Springfield Police Department reserves the right to exercise their discretion to deny an application for a LTC regarding unsuitability or as a prohibited person.
- B. An applicant who is neither a "prohibited person" or "unsuitable" must be issued an unrestricted license to carry.

III. APPLICATION REQUIREMENTS

- A. All applicants must be at least 21 years of age,
- B. Per Massachusetts General Laws c. 140, § 131 (d), the following are eligible to obtain a LTC from the Springfield Police Department: any person residing or having a place of business within the City of Springfield or any Police Officer currently employed by the City of Springfield.
- C. All applicants for an LTC must successfully complete, with certification, a Massachusetts State Police-approved Firearms Safety Course that includes a live fire component. Check online at www.goal.org or www.nrainstructors.org to find a certified training program.

- D. There is a \$100 application fee for a Firearm ID (FID) or a LTC and all fees are non-refundable. All payments are due at the time of application.
- E. Applicants must submit the following items:
 - 1. A completed application form (obtainable from the Springfield Police Department);
 - 2. A copy of your Birth Certificate (if you are a citizen by birth), a U.S. passport, Naturalization Papers, or Permanent Resident Card, whichever is applicable;
 - 3. Proof of Springfield residence, MA driver's license or ID with a valid Springfield address, a utility bill (Electric, Gas, Land Phone Line, or Lease Agreement).
 - 4. Copies of the certificates you have received from applicable training course(s)
- F. The Springfield Police Department reviews the application and conducts a thorough criminal background investigation.
- G. Applicants will be notified by mail if an application is rejected.

IV. **PROHIBITED PERSONS;** If the applicant falls into one of these categories, they must not be issued a license to carry

- A. Under c. 140, § 131, in order to be eligible for an LTC the applicant may not have ever been convicted in any court of the Commonwealth or any other state or federal jurisdiction for:
 - 1. A felony;
 - 2. A misdemeanor punishable by more than 2 years;
 - 3. A violent crime as defined in c. 140 § 121;
 - 4. A violation of any law involving weapons or ammunition for which a term of imprisonment may be imposed;
 - 5. A violation of any law regulating controlled substances as defined in section 1 of chapter 94C including, but not limited to, a violation of said chapter 94C;
 - 6. A misdemeanor crime of domestic violence as defined in 18 U.S.C. 921(a)(33);
- B. A conviction is a finding of guilty for an adult or an adjudication of delinquency in the case of a juvenile. Also note, MGL. Chapter 140 Section 131 Defines a "Conviction" as a finding or verdict of guilt, or a plea of guilty, whether or not final sentence is imposed;
- C. Applicants are also ineligible if they are currently the subject of an outstanding arrest warrant in any state or federal jurisdiction or a permanent temporary domestic restraining order.
- D. Applicants are disqualified under federal law to possess firearms or ammunition pursuant to 18 U.S.C. § 922(g) (1). That section states "it is unlawful for any person who has been convicted in any court of a crime punishable by imprisonment for a term exceeding one (1) year to possess in commerce, any firearms or ammunition." Further, 18 U.S.C. § 921 (a) (20) makes it clear that any Massachusetts offense classified as a misdemeanor carrying a prison term of longer than two (2) years is a disqualifying conviction under federal law. M.G.L. chapter 140 sections 129B and 131(g) provide that any persons

prohibited by either Massachusetts or Federal laws are prohibited from having an F.I.D. or L.T.C.

V. **SUITABILITY.**

- A. A "suitable person" has been defined as an individual who is sufficiently responsible to be entrusted with a license to carry firearms. Under the suitability provision of Massachusetts General Laws c. 140, § 131 (d), the licensing authority is permitted to and may consider all information available from all sources, including but not limited to the following: incident reports, the underlying facts of any incidents, dismissed criminal charges, sealed records, pardoned offenses, evidence of volatile relationships, suppression of evidence in any criminal prosecution, the lack of compliance with firearm laws, any arrest for a misdemeanor punishable by imprisonment for more than two years, any felony arrest and any arrest involving physical violence or threats to commit physical violence, any domestic violence incident, any drug arrest and/or any alcohol or drug related OUI or multiple minor alcohol related arrests or convictions.
- B. The licensing authority may deny the application or renewal of a license to carry, or suspend or revoke a license issued if, in a reasonable exercise of discretion, the licensing authority determines that the applicant or licensee is unsuitable to be issued or to continue to hold a license to carry. A determination of unsuitability shall be based on:
 - 1. Reliable and credible information that the applicant or licensee has exhibited or engaged in behavior that suggests that, if issued a license, the applicant or licensee may create a risk to public safety; or
 - 2. Existing factors that suggest that, if issued a license, the applicant or licensee may create a risk to public safety.
 - 3. Any denial of a license based on unsuitability or otherwise must be conveyed with a written notice to the applicant or licensee that explains the specific reasons for the denial. G.L. c. 140, § 131(d), (e).

Cheryl C. Clapprood
Police Superintendent



**THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY
Department of Criminal Justice Information Services**

200 Arlington Street, Suite 2200, Chelsea, MA 02150
TEL: 617-660-4600 | TTY: 617-660-4606 | mass.gov/cjis

PD USE ONLY	
FTN:	_____
LIC #:	_____

**Submit this form and direct any questions to
your local police department**

**MASSACHUSETTS RESIDENT LTC/FID/MACHINE GUN APPLICATION
FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY
FIREARMS OR LICENSE TO POSSESS A MACHINE GUN (M.G.L. c. 140, §§ 129B, 131)**

CHECK ONE:

- New Applicant*
- Renewal - Most Recent License to Carry/FID Number: _____

*NOTE: If application is for a first firearms identification card or license to carry firearms, a copy of the Firearms Safety Certificate or Hunter Safety Course Certificate must be attached, unless exempt by statute. If this is a renewal application, a lost/stolen firearms affidavit must be submitted.

LICENSE APPLICATION TYPE (Check Only One):

- Firearms Identification Card - Restricted (self-defense spray)
- Firearms Identification Card
- License to Carry
- License to Possess a Machine Gun
- Gun Club License (Only the Colonel of the State Police can issue a club license)

EXCEPT FOR SIGNATURE, PRINT OR TYPE ALL REQUESTED INFORMATION:

Last Name	First Name	Middle Name	Suffix
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Residential Address	City	State	Zip Code	Telephone Number
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Mailing Address	City	State	Zip Code	Telephone Number
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Date of Birth	Place of Birth (City, State, Country)
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Mother's First Name	Mother's Maiden Name	Father's First Name	Father's Last Name
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Height	Weight	Build	Complexion	Hair Color	Eye Color
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Occupation	Social Security Number (Optional)	Drivers License Number
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Employed By	Business Address
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City/Town	State	Zip	Telephone Number
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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. Have you ever renounced your U.S. citizenship? YES NO

3. What is your age? _____ (You must be 21 to apply for a LTC, 18 to apply for a FID card, or 14 to 17 with submission of a certificate of parent or guardian granting permission to apply for a FID card or FID card – Restricted).

4. Have you ever been arrested or appeared in court as a defendant for any criminal offense? YES NO

5. Are you the subject of any pending criminal charges? YES NO

6. Have you ever been convicted of a felony? YES NO

7. Have you ever been convicted of the unlawful use, possession, or sale of controlled substances as defined in M.G.L. c. 94C, § 1? YES NO

8. Have you ever been convicted of a violent crime or a crime of domestic violence? YES NO

9. Have you ever been convicted as an adult or adjudicated a youthful offender or delinquent child in any state or federal jurisdiction? YES NO

10. Are you now, or have you ever been the subject of a restraining order issued pursuant to M.G.L. c. 209A, or a similar order issued by another jurisdiction? YES NO

11. Are you currently the subject of any outstanding arrest warrant in any state or federal jurisdiction? YES NO

12. Have you ever been committed to any hospital or institution for mental illness, or alcohol or substance abuse? YES NO

13. Has any firearms license issued under the laws of any state or territory ever been suspended, revoked, or denied? YES NO

14. Have you been discharged from the armed forces of the United States under dishonorable conditions? YES NO

15. Have you been the subject of an order of the probate 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 Massachusetts, 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", when, where, and license number? _____

List the name and addresses of two references (as required by your licensing authority)

1.

_____		_____	
Last Name	First Name		
_____		_____	_____
Address	City/Town	State	Zip

2.

_____		_____	
Last Name	First Name		
_____		_____	_____
Address	City/Town	State	Zip

Reason(s) for requesting the issuance of a card or license:

- Unrestricted Target & Hunting Sporting Employment

Use lines below to indicate the reason(s) you are requesting the license; use a separate sheet of paper if necessary)

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 _____ month _____ year

Signature of Applicant: _____

Springfield Police Department

PRINT OR TYPE ALL INFORMATION

SOCIAL SECURITY NUMBER: _____

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____ EMAIL ADDRESS: _____

CITY: _____ STATE: _____ DATE OF BIRTH: _____

PLACE OF BIRTH: _____
CITY/TOWN STATE/COUNTRY

PHONE #: HOME _____ CELL _____

SEX: (circle one) FEMALE MALE NON BINARY _____

RACE: (circle one)

- ASIAN INDIAN OR PACIFIC ISLANDER
- BLACK OR AFRICAN
- AMERICAN INDIAN OR ALASKAN NATIVE
- CAUCASIAN, HISPANIC-LATINO, MIDDLE EASTERN

HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

R-HANDED: _____ L-HANDED: _____ BOTH: _____

MARRIED: _____ SINGLE: _____ DIVORCED: _____

SPOUSE FULL NAME-MAIDEN: _____

FATHER'S NAME: _____

MOTHER'S FULL NAME-MAIDEN: _____

PRESENT OCCUPATION: _____

EMPLOYER: _____

ADDRESS: _____
STREET CITY AND STATE

*******DO NOT FILL BELOW THIS LINE FOR POLICE USE ONLY*******

ID USED: _____ DRIVERS LIC: _____
NUMBER EXP. DATE

PASSPORT: _____
COUNTRY NUMBER EXP. DATE

OTHER: _____
TYPE NUMBER EXP. DATE

NEW: _____ RENEW: _____ .

F/A #: _____ .

IF NEW APPLICANT ONLY