



VERIFICATION OF RETIRED POLICE OFFICER FOR LIFETIME HANDGUN CARRY PERMIT

Per T.C.A. §39-17-1351(x)(5) the total fee required for a lifetime retired officer handgun carry permit shall be one hundred dollars (\$100) if the applicant completes verification of the following:

NAME OF APPLICANT: _____	
POSITION HELD AT	NAME OF AGENCY
TIME OF RETIREMENT:	EMPLOYED WITH:

EMPLOYMENT VERIFICATION (completed by either Chief Law Enforcement Officer or designee)	
(A) Is a retired federal, state, or local law enforcement officer, as defined in § 39-11-106.	
(B) Served for at least ten (10) years prior to retirement and was POST-certified, or had equivalent training, on the date the officer retired.	
BEGINNING DATE OF EMPLOYMENT: _____	ENDING DATE OF EMPLOYMENT: _____
<i>I do hereby certify that the applicant meets the statutory requirements of T.C.A. §39-17-1351(x)(5). I understand that making any false oral or written statement, or exhibiting any false or misrepresented identification or documentation, with the intent to deceive, is punishable as a felony offense pursuant to the penalties of perjury. (T.C.A. §39-16-702).</i>	
COMPLETED BY: _____	TITLE: _____
DATE: _____	SIGNATURE: _____

SERVICE CHARACTER VERIFICATION (completed by Chief Law Enforcement Officer or designee)	
(C) Retired in good standing as certified by the chief law enforcement officer or designee of the organization from which the applicant retired.	
INITIAL FOR YES IN GOOD STANDING: _____	INITIAL FOR NOT IN GOOD STANDING: _____
<i>I do hereby certify that the applicant meets the statutory requirements of T.C.A. §39-17-1351(x)(5). I understand that making any false oral or written statement, or exhibiting any false or misrepresented identification or documentation, with the intent to deceive, is punishable as a felony offense pursuant to the penalties of perjury. (T.C.A. §39-16-702).</i>	
COMPLETED BY: _____	TITLE: _____
DATE: _____	SIGNATURE: _____

RESIDENT OF TENNESSEE VERIFICATION (completed by Driver Services Officer)	
(D) Is a resident of this state on the date of the application.	
DRIVER LICENSE NUMBER: _____	OR OTHER TN RESIDENT VERIFICATION: _____
<i>I do hereby certify that the applicant meets the statutory requirements of T.C.A. §39-17-1351(x)(5). I understand that making any false oral or written statement, or exhibiting any false or misrepresented identification or documentation, with the intent to deceive, is punishable as a felony offense pursuant to the penalties of perjury. (T.C.A. §39-16-702).</i>	
COMPLETED BY: _____	TITLE: _____
DATE: _____	SIGNATURE: _____