

Release of Information

Authorizing Mercer County Sheriff or Sheriff's Designee
To perform criminal records and incompetency check pursuant to
Application for a License to Carry a Concealed Handgun

Initial Each Box

I, _____, on the _____ day of _____, 20____, have filed an Application for a License to Carry a Concealed Handgun with the Mercer County Sheriff's Office.

I, the undersigned, understand that to process this application, the Sheriff or the Sheriff's designee will perform a criminal records check and incompetency records check as required by the Ohio Revised Code.

I, the undersigned, understand that in performing the criminal records check and incompetency check the Sheriff or the Sheriff's Designee may be contacting among other agencies, entities, departments, and bureaus, of the Federal Bureau of Investigation, the Bureau of Criminal Identification and Investigation, and the courts including but not limited to probate and juvenile courts.

I, the undersigned, understand that the criminal records check and incompetency check may include records which have been sealed or expunged.

I, the undersigned, understand that I can decide, at any time, not to continue with the application process. I, further understand that if I decide not to continue with the application process that I must notify the Sheriff or the Sheriff's Designee in writing, I further understand that after I notify the Sheriff or Sheriff's Designee in writing that I have decided not to continue with the application process, Sheriff or Sheriff's Designee will stop any investigation that is being conducted unless that investigation has revealed that I am engaging in activity of a criminal nature.

I, the undersigned, understand that if the criminal records check or incompetency check reveals that I am engaged in activity of a criminal nature that the investigation may continue even though I have decided not to continue with this application, Further, I understand that if the investigation reveals that I am engaged in activity of a criminal nature, I may be charged in an appropriate court with that violation.

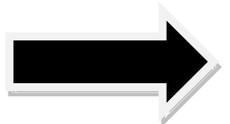
Having read and understood the foregoing, I, the undersigned, hereby consent to this criminal records check and incompetency check.

I, the undersigned, hereby authorize agencies, entities, departments, bureaus, and courts including but not limited to probate and juvenile courts to release to the Sheriff or Sheriff's Designee such information as is requested by the Sheriff or Sheriff's Designee to allow the processing of this application.

Print all Counties in Ohio and City/State outside of Ohio you have lived in since the age of 18.

Active, Reserve, Retired or Separated (honorably discharged) member of the armed forces of the United States

TURN PAGE OVER FOR ADDITIONAL INFORMATION



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(A) I am applying to renew my license –Go to Section (C)

(B) This is the first time I have applied for an Ohio Concealed Carry License

New applicants check and answer the following which applies:

- I spent _____ hours in-person with the instructor in the classroom, and _____ hours on the range.
 - The online class was _____ hours long and there was no interaction with the instructor during the class. I additionally spent _____ hours in-person with the instructor for class room and _____ hours with the instructor on the range.
 - I spent _____ hours on-line as my certified instructor presented the instruction and I was able to interact with my instructor, and I spent _____ hours in person with my instructor on the range.
 - Law Enforcement Training/Corrections
 - Military ID and equivalent training receive
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(C) Providing any false information or false documentation when applying for a Concealed Carry License, is a Felony of the 4th degree (ORC 2921.13).

Applicant's Name Printed Neatly

Applicant's Signature

Date

Social Security Number

Previous Legal Name(s) including Maiden Name:

If you would like your CCW mailed to an address other than that on your application, please provide the address below:
