



CONCEALED HANDGUN LICENSE (CHL) INSTRUCTIONS TO APPLICANT

Read Carefully

ORIGINAL LICENSE: If you are applying for an original license, bring the following items...

1. **FEE: \$65.00.** Make your check out in the amount of \$65.00 to the Benton County Sheriff's Office. Cash is also accepted; exact change please. This is the fee for a 4-year original license.
2. **APPLICATION FORM.** Must be completely filled out, legible and signed.
3. **FINGERPRINT CARD.** One Fingerprint Card is required. Have your fingerprints taken any Wednesday evening between 7:00pm and 8:00pm at the BCSO Emergency Services Office at 553 NW Monroe St., Corvallis. Tell the fingerprinter you are applying for a License to Carry a Concealed Handgun. No additional fees will be collected from you. Make sure the top of the card is filled out and signed.
4. **COPY OF DOCUMENT SHOWING PROOF OF COMPETENCY.** See the reverse side for a list of ways to demonstrate competence with a handgun.
5. **SIGNED REFERENCE SHEET.** Have two character references complete and sign the "Concealed Handgun License Required References" form.
6. **PROOF OF CITIZENSHIP.** Birth certificate, passport or appropriate INS forms. Effective 3/1/11.
7. **PICTURE.** A picture of you will be taken when you turn in your completed application.

RENEWAL LICENSE: If you are applying for a renewal license, bring the following items...

1. **FEE: \$50.00.** Make your check out in the amount of \$50.00 to the Benton County Sheriff's Office. Cash is also accepted; exact change please. This is the fee for a 4-year renewal license.
2. **APPLICATION FORM.** Must be completely filled out, legible and signed. ***IMPORTANT NOTE:*** If your license has expired, you will also need to have two character references complete and sign the "Handgun License Required References" form.
3. **NEW REQUIREMENT EFFECTIVE MARCH 1, 2011: PROOF OF CITIZENSHIP.** Birth certificate, passport or appropriate INS forms.
4. **PICTURE.** A picture of you will be taken when you turn in your completed application.

***You may turn your original or renewal license documentation into the
Benton County Sheriff's Office at the following times:***

TUESDAYS: 10:30 a.m. to 12:30 p.m.

THURSDAYS: 12:30 p.m. to 2:00 p.m.

If you have questions, please contact our Records Specialist at 541-766-6606.

PROOF OF COMPETENCE WITH A HANDGUN:

You must be able to demonstrate competence with a handgun by any of the methods provided by law as follows:

- A. Completion of any NRA firearms safety or training course if handgun safety was a component of the course.
- B. Completion of any firearms safety or training course or class available to the general public offered by law enforcement, community college, or private or public institution or organization or firearms training school utilizing instructors certified by the NRA or a law enforcement agency if handgun safety was a component of the course.
- C. Completion of any law enforcement firearms safety or training course or class offered for security guards, investigators, reserve law enforcement officers or any other law enforcement officers if handgun safety was a component of the course.
- D. Present evidence of equivalent experience with a handgun through participation in organized shooting competition or military service.
- E. Is licensed or has been licensed to carry a firearm in this state, unless the license has been revoked.
- F. Completion of any firearms training or safety course or class conducted by a firearms instructor certified by a law enforcement agency or the NRA if handgun safety was a component of the course.

[ORS 166.291]

ADDITIONAL INFORMATION:

The processing of your **Original License**, as required by law, can take up to 45 days. Because fingerprints are not required on a **Renewal License**, processing time will be approximately 2 weeks. Your license will be mailed to you.

CAUTION:

Possession of a Concealed Handgun License does not authorize you to carry a firearm in any federal building, beyond the screening area in an airport, in a courtroom, jury room, judge’s chambers or areas adjacent thereto, or any part of a courthouse where the presiding judge has posted notice of such prohibitions. If you are apprehended with a weapon on these premises, your Concealed Handgun License will be seized and returned to the Sheriff.



APPLICATION FOR LICENSE TO CARRY CONCEALED HANDGUN

Original License	<input type="checkbox"/>	\$65.00 (includes fingerprinting)
License Renewal	<input type="checkbox"/>	\$50.00
License Transfer	<input type="checkbox"/>	\$15.00
Change of Address, Lost or Stolen	<input type="checkbox"/>	\$15.00

Full Legal Name Last _____ First _____ Middle _____

Other Names Used Last _____ First _____ Middle _____

PLEASE READ CAREFULLY

I hereby declare as follows: (Check each box that applies)

<input type="checkbox"/>	I am a citizen of the United States. If I am not a citizen, I am a legal resident alien who can document continuous residence in Benton County for at least six months and have declared in writing to the Immigration and Naturalization Service my intention to become a citizen and can present proof of the written declaration to the Sheriff at the time of this application.
<input type="checkbox"/>	I am now at least 21 years of age.
<input type="checkbox"/>	I have NEVER been convicted of a felony, except for insanity under ORS 161.295.
<input type="checkbox"/>	I have NOT within the last four years, been convicted of a misdemeanor except for insanity under ORS 161.295.
<input type="checkbox"/>	I have not been under the jurisdiction of the Juvenile Department in the last four years for committing an act involving violence, as defined in ORS 166.470, that if committed by an adult would constitute a felony or a misdemeanor.
<input type="checkbox"/>	There are no outstanding warrants for my arrest, and I am not free on any form of pretrial release.
<input type="checkbox"/>	I do not have any charges pending in any court resulting from an arrest or citation.
<input type="checkbox"/>	I am not subject to a citation or court order restraining me from contacting or stalking another.
<input type="checkbox"/>	I have not been convicted of a controlled substance offense or participated in court order drug diversion, with the exception of the combination of offenses outlined in ORS 166.291(L).
<input type="checkbox"/>	I have not received a dishonorable discharge from the Armed Forces of the United States.
<input type="checkbox"/>	I am not required to register as a sex offender in any state.
<input type="checkbox"/>	I have not been committed to the Mental Health Services Division under ORS 426.130, nor have I been found mentally ill and presently subject to an order prohibiting me from purchasing a firearm because of mental illness.

If any item above has **NOT** been checked, in order to qualify for a Concealed Handgun License you must be granted relief, or wish to petition for relief, from a disability under ORS 166.274 or ORS 166.293 or 18 USC 925(c), or those records have been expunged.

Age _____ Birthdate _____ Birthplace State _____

Social security number _____ Disclosure of your social security number is voluntary. Solicitation of the number is authorized under ORS 166.420. It will be used only as a means of identification.

Height _____ ft. _____ in. Weight _____ Hair Color _____ Eye Color _____ Sex _____

Current Address: Street _____

City _____ State _____ Zip _____ Phone (____) _____

Mailing address (if different) _____

APPLICATION FOR LICENSE TO CARRY CONCEALED HANDGUN (CHL), continued

List residence addresses for the past three years if different from present address:

Street _____ City _____ State _____ Zip _____
 Street _____ City _____ State _____ Zip _____

List all states in which you have resided as an adult (18 years and older)

Place of current employment:

Company name _____ Phone (____) _____

I have read the entire text of this application, and the statements therein are true and correct. Making false statements on this application is a misdemeanor.

Privacy Statement: If you are seeking a Concealed Handgun License for personal safety purposes, please mark this box. If this box is marked, Benton County will consider the personal information on this application exempt from public disclosure under ORS 192.445(1), however, this information may be disclosed if required by a court order or subpoena.

I understand that I will be photographed and/or fingerprinted.

Signature of Applicant: _____

Date: _____

SPACE BELOW FOR OFFICIAL USE ONLY

Proof of Identification: *Two pieces of ID are required, one of which must bear the photograph of the applicant.*

Type		Number	
Type		Number	

Proof of Citizenship: Birth Certificate Passport Other: _____

Competency with Handgun Documentation	<i>Approved Course</i>	<input type="checkbox"/>
	<i>Military Service</i>	<input type="checkbox"/>
	<i>Concealed Handgun License</i>	<input type="checkbox"/>

LICENSE APPROVED

LICENSE DENIED

BY: _____

Date Issued		Fee Paid		License #	
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Expiration Date	
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Benton County Sheriff's Office

180 NW 5th St
Corvallis, OR 97330

(541) 766-6858
FAX (541) 766-6011

**CONCEALED HANDGUN LICENSE
REQUIRED REFERENCES**

(This reference sheet must be turned in with your application)

Original License	Two character references are required. Please have your references sign the statements and print their names and addresses in the indicated spaces below.
Renewal License	References are required if your license has expired.

Applicant Name: _____

I agree to be a character reference for the above individual and know of no reason why this license should not be issued.

Signature: _____ Date: _____

Print name and address:

I agree to be a character reference for the above individual and know of no reason why this license should not be issued.

Signature: _____ Date: _____

Print name and address:
