

Office use only	
ID number	_____
SID number	_____
FBI number	_____

I intend to deal in: (check all that apply)

- Pistols
- Firearms other than pistols
- Ammunition

**Firearms dealer information**

Full name of firearms dealer company/corporation/owner agent			
Business address (include physical and Post Office box addresses)			
City	State	ZIP code	County
Type of identification (driver license, etc.)		Identification number	
Federal firearms license number		Expiration date	
(Area code) Business telephone number	Washington UBI number (16 digits)	Previous dealer license expiration date	

**Individual/Agent information**

PRINT or TYPE Name (Last,First,Middle)							
List any other names by which you have been known (maiden name, alias, etc.)							
Residential address							
City				State	ZIP code	County	
Date of birth (mm/dd/yyyy)	Age	Race	Gender	Height	Weight	Eyes	Hair
List type and location of all marks, scars, and tattoos							
Have you been a resident of Washington state for the last 90 days? <input type="checkbox"/> Yes <input type="checkbox"/> No				(Area code) Home telephone (optional)			
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		Place of birth (city, state or province, and country)					
If you are not a U.S. citizen, in order to legally possess a firearm you are required to obtain an alien firearms license (RCW 9.41.170). Do you possess such a license? <input type="checkbox"/> Yes <input type="checkbox"/> No							
If you possess an alien firearms license, enter the license number, expiration date, and Alien Registration/I-94 number							

1. Have you ever been convicted in adult court or adjudicated in a juvenile court, in this state or elsewhere, of one of the prohibitive crimes described on page 2 of this form? . . . . .  Yes  No
2. Are you now on bond or personal recognizance pending trial, appeal, or sentence for any serious offense, as defined in RCW 9.41.010? . . . . .  Yes  No
3. Are you the subject of an outstanding arrest warrant from any court for any crime? . . . . .  Yes  No
4. Have you been convicted of three or more violations of Washington's firearms laws within any five-year period? . . . . .  Yes  No
5. Have you had a firearm forfeited within the past year for a drug or alcohol incident pursuant to RCW 9.41.098(1)(e)? . . . . .  Yes  No
6. Are you under a court order or an injunction concerning the possession of a firearm? . . . . .  Yes  No
7. Is your concealed pistol license, if any, in a revoked status? . . . . .  Yes  No
8. Have you ever been confined in a mental-health facility for more than fourteen days for treatment, or been committed as criminally insane? . . . . .  Yes  No

If you answered yes to any of the numbered questions above, but still believe you are eligible for a license, attach a list of dates and circumstances including copies of any applicable pardons, certificates of rehabilitation, or court orders.

**Dealer requirement information**

RCW 9.41.110, Section 5(b): "A dealer shall require every employee who may sell a firearm in the course of his or her employment to undergo fingerprinting and a background check. An employee must be eligible to possess a firearm, and must not have been convicted of a crime that would make the person ineligible for a concealed pistol license, before being permitted to sell a firearm. Every employee shall comply with requirements concerning purchase applications and restrictions on delivery of pistols that are applicable to dealers."

Initial to confirm that you have read and understood this section **X**\_\_\_\_\_

**Caution:** Local laws and ordinances on firearms are preempted by state laws and must be consistent with state law. Although state and local laws do not differ, federal law and state law on the possession of firearms differ. If you are prohibited by federal law from possession of a firearm, you may be prosecuted in federal court. A state license is not a defense to a federal prosecution.

**Washington State prohibitive crimes**

- Conviction or adjudication for any felony offense in this state or elsewhere.
- Any of the following crimes when committed by one family or household member against another, committed on or after July 1, 1993:
  - Assault in the fourth degree
  - Coercion
  - Stalking
  - Reckless endangerment
  - Criminal trespass in the first degree
  - Violation of the provisions of a protection order or no-contact order restraining the person or excluding the person from a residence

**Federal law prohibits the following persons from receiving a firearm:**

- anyone who is an unlawful user of, or is addicted to, narcotics or other controlled substances
- anyone who is of unsound mind, is adjudicated as mentally defective, or who has been committed to a mental institution
- anyone who has been dishonorably discharged from the Armed Forces
- anyone who is an alien and is in the U.S. illegally or unlawfully
- anyone who has renounced his or her U.S. citizenship
- anyone convicted of, or under indictment/information for, a felony crime punishable by imprisonment for a term that is longer than one year, if the law of the state of conviction bars possession of a firearm
- anyone who is a fugitive from justice

**Applicant signature**

Signing this application authorizes the Department of Social and Health Services, as well as mental-health institutions and other health-care facilities, to release information relevant to your eligibility for a firearms dealer license to an inquiring court or law-enforcement agency.

*I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_ **X** \_\_\_\_\_  
Date and place Applicant signature

Local law enforcement use only		
Database	Date	Checked by _____
<input type="checkbox"/> WASIS/NCIC III	_____	_____
<input type="checkbox"/> WACIC/NCIC	_____	_____
<input type="checkbox"/> Warrant file	_____	_____
<input type="checkbox"/> DOL firearms file	_____	_____
<input type="checkbox"/> DSHS	_____	_____
<input type="checkbox"/> Local check	_____	_____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied		By _____ Date _____