



CALIFORNIA DEPARTMENT OF JUSTICE BUREAU OF FIREARMS ENTERTAINMENT FIREARMS PERMIT APPLICATION



(Instructions on Reverse)

A. Application Type (check appropriate box)		
<input type="radio"/> New Permit	Applicant Tracking Identifier (ATI) No.:	
<input type="radio"/> Annual Renewal	Entertainment Firearms Permit No.:	Date of Expiration (mm/dd/yyyy):

B. Applicant Information			
Last Name:	First Name:	Middle Name:	
Alias Last Name (if any):	Alias First Name:	Alias Middle Name:	
Phone No. (include area code):	Social Security No.:		
Date of Birth (mm/dd/yyyy):	Place of Birth (state or country):	Sex:	
U.S. Citizen? <input type="radio"/> Yes <input type="radio"/> No	If no, enter Alien Registration No. or I-94 No.:	Country of Citizenship:	
Residence Street Address:	City:	State:	Zip Code:
Mailing Address (if different):	City:	State:	Zip Code:

C. Declaration	
<p><i>I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I expressly authorize the Department of Justice to perform firearms eligibility checks of all relevant state and federal databases, including the Federal Bureau of Investigation's National Instant Criminal Background Check System. I also understand that if I currently possess or own firearms and the results of this check reveal that I am ineligible either to lawfully possess or purchase firearms, I must relinquish any and all firearms in my possession.</i></p>	
<p>Signature _____</p>	<p>Date _____</p>

FOR DOJ USE ONLY

Date Received: _____	EFP #: _____	Initials: _____
Issue/Denial Date: _____	NTN #: _____	



CALIFORNIA DEPARTMENT OF JUSTICE BUREAU OF FIREARMS ENTERTAINMENT FIREARMS PERMIT APPLICATION



New Applicants

Fingerprint Submission Requirements:

You must submit your fingerprint impressions before submitting this application form to the Department of Justice (DOJ). To submit fingerprint impressions, you must take a completed Request for Live Scan Service form (BCII 8016) to a Live Scan station. Please refer to www.oag.ca.gov/fingerprints for Live Scan station location information. Your fingerprint impressions will need to be submitted by the Live Scan operator to DOJ and FBI. You must pay the Live Scan operator an \$80 DOJ fingerprint processing and BOF eligibility processing fee, a \$19 FBI fingerprint processing fee, and the Live Scan operator's fee (Note: the Live Scan operator fee varies by Live Scan site, and the Division of Law Enforcement, Bureau of Firearms does not regulate nor set this price).

The Live Scan operator will provide an Applicant Tracking Identifier (ATI) number on your copy of the Request for Live Scan Service form (BCII 8016). The ATI number documents your fingerprint submissions. You must enter your ATI number on the designated space of your Entertainment Firearms Permit application form.

Application Form Submission Requirements:

Complete the Entertainment Firearms Permit (EFP) Application form. Be sure to include your Live Scan ATI number. Mail your completed EFP Application to:

DEPARTMENT OF JUSTICE
BUREAU OF FIREARMS
FIREARMS LICENSING AND PERMIT SECTION-EFP
P.O. BOX 160367
SACRAMENTO, CA 95816-0367

It is recommended that you retain a copy of your completed EFP Application form and your Request for Live Scan Service form for your records.

Renewal Applicants

Fingerprint submissions are not required for annual renewal applications. Mail your completed EFP Application, along with the \$29.00 EFP Annual Renewal Fee to the address listed below.

DEPARTMENT OF JUSTICE
BUREAU OF FIREARMS
FIREARMS LICENSING AND PERMIT SECTION-EFP
P.O. BOX 160367
SACRAMENTO, CA 95816-0367

It is recommended that you retain a copy of your completed EFP Application form and your Request for Live Scan Service form for your records.

If you have any questions, please contact the Firearms Licensing and Permit Section at (916) 227-2153.

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The Bureau of Firearms in the Department of Justice collects the information requested on this form as authorized by Penal Code sections 29500 and 29505. The Bureau of Firearms uses this information to establish grounds for issuance of a permit indicated on this application. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided.

Access to Your Information. You may review the records maintained by the Bureau of Firearms in the Department of Justice that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to establish grounds for issuance of a permit indicated on this application, we may need to share the information you give us with any peace officer or other person designated by the Attorney General upon request.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information. For questions about this notice or access to your records, you may contact the Department of Justice, Bureau of Firearms at P.O. Box 160367, Sacramento, CA 95816-0327 or (916) 227-2153.



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

CA0349400

ORI (Code assigned by DOJ)

Entertainment Firearms Permit Application

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Entertainment Firearms Permit Application

Authorized Applicant Type

Contributing Agency Information:

Department of Justice, Bureau of Firearms

Agency Authorized to Receive Criminal Record Information

P.O. Box 160367

Street Address or P.O. Box

Sacramento

City

CA 95816-0367

State ZIP Code

01123

Mail Code (five-digit code assigned by DOJ)

Firearms Licensing and Permit Section

Contact Name (mandatory for all school submissions)

(916) 227-2153

Contact Telephone Number

Applicant Information:

Last Name

Other Name

(AKA or Alias) Last

Date of Birth

Sex Male Female

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or P.O. Box

First Name

Middle Initial

Suffix

First

Suffix

Driver's License Number

Billing Number

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

City

State

ZIP Code

N/A

Your Number: N/A

OCA Number (Agency Identifying Number)

Level of Service:

DOJ

FBI

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

N/A

Employer Name

N/A

Street Address or P.O. Box

N/A

City

State

ZIP Code

N/A

Mail Code (five digit code assigned by DOJ)

N/A

Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed