

Jefferson Parish Sheriff's Office



JEFFERSON PARISH CONCEALED HANDGUN PERMIT “NEW” APPLICATION PACKAGE

- Contact the Jefferson Parish Gun Permit Section at (504) 363-5632 or email at gunpermits@jpsso.com
- Additional information on Jefferson Parish Concealed Handgun Permits can be found at our website: www.jpsso.com

GENERAL INFORMATION AND INSTRUCTIONS

(Please read and follow instructions carefully. Failure to submit application correctly may result in processing delays or denial of a permit.)

1. CONCEALED HANDGUN PERMIT LAW – LRS 40:1379.1.G.

- a) LRS 40:1379.1.G. authorizes the Sheriff to issue concealed handgun permits to an individual. The permit granted is only valid within the boundaries of Jefferson Parish. Applicants must be residents of Jefferson Parish or must provide proof of employment in Jefferson Parish.

2. TERM OF PERMIT (New and Renewal Applications)

All permits issued by the Jefferson Parish Sheriff are valid for a period of one (1) year from the date of issuance, whether the permit is a new issue or a renewal. If permit is expired for more than 60 days, a “new” permit application will have to be completed.

3. APPLICATION/PROCESSING FEES (New and Renewal Applications)

- a) The cost of a Concealed Handgun Permit in Jefferson Parish is \$25.00 per year.
- b) Fees are payable at time of application and are non-refundable.
- c) Fees are payable to the **Jefferson Parish Sheriff's Office** in the form of a personal check, cashier's check, certified check, or money order. **Cash is not accepted.**
- d) An additional \$15.00 fee is due if a wallet/folder is needed for the permit.

4. DOCUMENTS AND FILINGS (New and Renewal Applications)

- a) You must submit a “New” Application for a Concealed Handgun Permit if:
 - i. This is the first time you have applied for a permit in Jefferson Parish.
 - ii. Your previous permit has been expired for more than 60 days.
 - iii. Your previous application for a permit was denied or your permit was revoked.
- b) Submit the completed, **original** application form to the address noted above. Please print legibly or type the data in the form fields. Also, please make sure all required fields are completed. **Do not send a photocopied application.**

- b) Applicants for a Jefferson Parish Concealed Handgun Permit must provide proof of residency in Jefferson Parish. As such, all applicants must submit a copy of a **valid Louisiana driver’s license** (front and back).
 - i. Other acceptable methods of identification and proof of residency include 1) a valid Louisiana Identification Card, a valid United States Passport, a recent utility bill or phone bill in the name of the applicant, or a valid Louisiana Voter Registration Card. **Note that Post Office Boxes do not suffice.**
 - ii. If you do not reside in Jefferson Parish but work within the Parish, the Sheriff may still issue you a handgun permit. Proof of employment (in the form of a letter from your employer) will be accepted along with an explanation from you of why a handgun permit is considered necessary.
- c) **Fingerprints** must be provided so that we may properly perform the required criminal history checks.
 - i. The Jefferson Parish Sheriff’s Office Records and Reports Section (1233 Westbank Expressway, Bldg A, Harvey, LA 70058) generally provides fingerprinting services to the general public for a fee. As part of your handgun permit application, fingerprints will be obtained at this office and all related fingerprinting fees will be waived.
 - ii. When turning in your application to the JPSO Gun Permit Section, **please schedule sufficient time to be escorted to the Fingerprint Section so that a Fingerprint Card can be processed.**
- d) A **Social Security Number (SSN)** is asked for on the application form in order to us to properly conduct the required criminal history check. Your SSN will only be used for Criminal Justice purposes only. Inclusion of your SSN is “optional” and will not constitute grounds for denial. However, verification of your eligibility to carry a concealed handgun is required by law. As such, failure to include the SSN on the application may result in a delay of approving your application.
- e) If you have ever been arrested, charged, detained, indicted or summoned for any criminal offense or violation, you **must** answer “Yes” to the arrest questions and submit certified true copies of the final court disposition of the case with your application.

FAILURE TO LIST ALL ARRESTS, DETENTIONS, AND LITIGATION MAY RESULT IN DELAY OR DENIAL OF THE PERMIT.

- i. This is regardless of the disposition or final outcome of the violation.
- ii. You must list all violations of law or municipal ordinances, except those such as traffic violations (speeding tickets, red light tickets, expired license tickets, etc.)
- iii. You must still list a violation even it the case was EXPUNGED, DISMISSED, or SET ASIDE through either Article 893, Article 894, or for which you were PARDONED and you must provide documentation on each arrest.

5. FALSE STATEMENTS

False statements will result in denial of this application.

6. INDEMNIFICATION

LRS 40:1379.1.G provides that the officer who performed the standard criminal record check shall not be liable for acts committed by the permittee, unless the officer had actual personal knowledge at the time he issued the permit that the permittee was mentally unstable or disqualified by law from processing a firearm.

Jefferson Parish Sheriff's Office



JEFFERSON PARISH CONCEALED HANDGUN PERMIT “NEW” PERMIT APPLICATION

LEGAL NAME (LAST, FIRST, MIDDLE)			MAIDEN NAME (IF DIFFERENT)	
SEX MALE FEMALE		RACE WHITE BLACK ASIAN/PACIFIC OTHER:		
DATE OF BIRTH MO DAY YR		SOCIAL SECURITY NUMBER (SSN)		DRIVER'S LICENSE NUMBER (OR ID #)
PLACE OF BIRTH CITY STATE		EMAIL ADDRESS		STATE ISSUED IN / /
CURRENT STREET ADDRESS		CITY	PARISH/COUNTY	STATE ZIP CODE
MAILING ADDRESS (IF DIFFERENT)		CITY	PARISH/COUNTY	STATE ZIP CODE
PHONE NUMBER HOME OFFICE		HEIGHT	WEIGHT	EYE COLOR HAIR COLOR
MARITAL STATUS SINGLE MARRIED DIVORCED WIDOWED SEPARATED				
Previous Residences – Complete this section if you have not lived at your current address for the past five (5) years.				
PREVIOUS ADDRESS	CITY	STATE	FROM DATE (MO/YR)	TO DATE (MO/YR)
PREVIOUS ADDRESS	CITY	STATE	FROM DATE (MO/YR)	TO DATE (MO/YR)
Previous Permit – Complete if you were previously issued a permit from Jefferson Parish that has expired or been revoked.				
JP PERMIT NO.			DATE EXPIRED OR REVOKED	

Education and Training – Answer each question that applies to you.

NAME AND ADDRESS OF HIGH SCHOOL ATTENDED

DATES ATTENDED HIGH SCHOOL

HIGH SCHOOL GRADE COMPLETED

DID YOU RECEIVE A DIPLOMA OR EQUIVALENCY CERTIFICATE?

OTHER SCHOOLS OR COLLEGES ATTENDED

ANY FIREARMS TRAINING (POLICE, MILITARY, ETC)?

LIST CERTIFICATION RECEIVED

ANY LAW ENFORCEMENT TRAINING?

Employment

NAME OF COMPANY/BUSINESS/FIRM

STREET ADDRESS

CITY

STATE

ZIP CODE

TYPE OF BUSINESS

POSITION HELD (TITLE)

DATE OF EMPLOYMENT (MO/YR)

FROM TO

NAME OF IMMEDIATE SUPERVISOR

SUPERVISOR'S TITLE

CONTACT PHONE NUMBER

References – List three persons who are not related to you and have knowledge of your qualifications and fitness to receive a concealed handgun permit.

FULL NAME

BUSINESS OR HOME ADDRESS

HOME PHONE

OCCUPATION

BUSINESS PHONE

1.

2.

3.

Military Service – Check “Yes” or “No”

YES

NO

ARE YOU CURRENTLY SERVING IN THE ARMED FORCES OF THE UNITED STATES?

HAVE YOU EVER SERVED IN THE ARMED FORCES OF THE UNITED STATES?

WERE YOU DISCHARGED FROM THE ARMED FORCES?

IF SO, INDICATE TYPE OF DISCHARGE

Eligibility Questions – All applicants should answer “Yes” or “No” to all questions below. Read each question carefully. If you make an error, cross out the incorrect choice and initial the change. If you answer “Yes” to Questions 5 to 10, please complete the next section to explain the circumstances.

FAILURE TO ANSWER QUESTIONS HONESTLY WILL RESULT IN DENIAL OF THIS APPLICATION

Check One		
YES	NO	
		1. Are you a United States Citizen?
		2. Are you lawfully present in the United States?
		3. Are you a registered voter in the State of Louisiana?
		4. Are you at least 21 years of age?
		5. Have you ever been arrested for any criminal offense?
		6. Have you ever been found guilty of, or entered a plea of guilty or nolo contendere to operating a vehicle while intoxicated?
		7. Have you ever received a pardon or expungement for a criminal offense?
		8. Are you currently on probation or parole for a criminal offense?
		9. Are you a fugitive from justice?
		10. Are you currently subject to any preliminary or permanent injunction, or restraining or protective order, including but not limited to divorces, family or domestic violence?
		11. Are you an unlawful user or addicted to marijuana, depressants, stimulants, or narcotic drugs?
		12. Have you ever been committed involuntarily or voluntarily to any treatment facility, institution, or hospital for the abuse of dangerous substances as defined in LRS 40:961 and 964?
		13. Have you ever been adjudicated mentally deficient or been committed to a mental institution?
		14. Have you ever been hospitalized for any form of mental illness or infirmity?
		15. Have you ever received medical treatment for a mental disorder of any kind by a licensed practitioner?
		16. Are you currently taking, or have you ever been prescribed any medication used for the treatment of depression, psychosis, or any other mental illness?
		17. Are you suffering from any mental or physical infirmity due to disease, illness, or retardation which could prevent the safe handling of a handgun?
		18. Have you ever been denied a concealed handgun permit in any jurisdiction or had such permit suspended or revoked?

Arrests, Detentions, and Litigation – If you answered yes to Questions 5 to 10, provide details below. If additional space is needed, attach documentation as needed.

DATE OF ARREST	CHARGE	LOCATION (CITY/STATE)	DISPOSITION	ARRESTING AGENCY

Other Information

EXPLAIN IN DETAIL WHY IT IS NECESSARY FOR YOU TO HAVE A CONCEALED HANDGUN PERMIT

Signature and Certification of Fact

I have read the foregoing application, and the contents thereof, and do hereby certify that my responses and information contained within this application are true and correct and they are an accurate account of the requested information. I have executed this statement voluntarily with the knowledge that any failure to provide truthful information is cause for denial of my application or revocation of a permit. I also understand that a permit from the Jefferson Parish Sheriff’s Office bears no authority to carry a concealed handgun in any other parish or jurisdiction outside of Jefferson Parish.

Applicant Signature

Date of Application

APPLICATION AND APPLICABLE FEE OWUV"DG"UWDOKVVGFD [" CRRQKPVGPV"QPN [:

Jefferson Parish Sheriff’s Office
 Handgun Permits
 3:23 Westbank Expressway
 Harvey, LA 70058
CALL (504) 363-5632 FOR AN APPOINTMENT

(FOR OFFICE USE ONLY)

RECEIVED BY	DATE RECEIVED	CHECK NUMBER	RECEIPT NUMBER