## A. Firearm Registration

City of Chicago / Department of Police

<table>
<thead>
<tr>
<th>Registration No.</th>
<th>New</th>
<th>Renewal</th>
<th>Transfer</th>
<th>Amendment</th>
<th>Date Registered (Day - Mo. - Yr.)</th>
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<tbody>
<tr>
<td>Name of Applicant (Last - First - M.I.)</td>
<td>Drivers License No. -</td>
<td>State</td>
<td>Home Phone No.</td>
<td>Applicant's Business Address</td>
<td>Business Phone</td>
<td>Male</td>
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<td>AMENDMENT ReNewal</td>
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## B. Firearm Registration Instructions

1. **If the firearm you are registering is a rifle,** answer the following questions:
   - **Type:**
     - 1. Bolt Action
     - 2. Automatic
     - 3. Semi-Automatic
     - 4. Lever Action
     - 5. Pump Action
     - 6. Belt Fed
   - **Does your rifle have a barrel having a threaded muzzle?**
     - Yes
     - No
   - **Does your rifle have a folding or telescoping stock?**
     - Yes
     - No
   - **Does your rifle have a bayonet mount?**
     - Yes
     - No
   - **Does your rifle have a flash suppressor or barrel having a threaded muzzle?**
     - Yes
     - No
   - **Is your rifle a grenade launcher?**
     - Yes
     - No
   - **Does your rifle have a pistol grip that protrudes?**
     - Yes
     - No
   - **Does your rifle have a fixed magazine capacity in excess of 5 rounds?**
     - Yes
     - No
   - **Does your rifle have a bayonet mount?**
     - Yes
     - No

2. **If the firearm you are registering is a handgun (includes revolver and pistol),** answer the following questions:
   - **Type:**
     - 1. Lever Action
     - 2. Automatic
     - 3. Semi-Automatic
     - 4. Double Barrel
     - 5. Over & Under
     - 6. Belt Fed
     - 7. Over & Under
   - **Is your handgun a semi-automatic version of an automatic firearm?**
     - Yes
     - No
   - **Does your handgun have a manufactured weight of 50 oz. or more when the handgun is unloaded?**
     - Yes
     - No
   - **Does your handgun have a barrel having a threaded muzzle?**
     - Yes
     - No
   - **Is your handgun a semi-automatic version of an automatic firearm?**
     - Yes
     - No

3. **If the firearm you are registering is a shotgun,** answer the following questions:
   - **Type:**
     - 1. Bolt Action
     - 2. Semi-Automatic
     - 3. Pump Action
     - 4. Lever Action
     - 5. Over & Under
     - 6. Double Barrel
     - 7. Double Barrel
     - 8. Double Barrel
   - **Does your shotgun have a folding or telescoping stock?**
     - Yes
     - No
   - **Does your shotgun have a pistol grip that protrudes?**
     - Yes
     - No
   - **Does your shotgun have an ability to accept a detachable magazine?**
     - Yes
     - No
   - **Does your shotgun have fixed magazine capacity in excess of 5 rounds?**
     - Yes
     - No

## C. Firearm Registration

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*CPD-31.562 (Rev. 2/12)*
PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE FILLING OUT THIS APPLICATION. FAILURE TO COMPLETE THE APPLICATION PROPERLY MAY RESULT IN YOUR APPLICATION BEING DENIED.

1. Type or print legibly in black or dark blue ink all information required on the application.

2. Sign the application in the THREE spaces indicated by an "X".


4. Submit ONE photocopy of your Chicago Firearms Permit.

5. Peace officers must submit ONE photocopy of your Employee Identification Card. In addition, an Affidavit of Employment form must accompany each application if you are a (1) Probationary Police Officer of the Chicago Police Department, or (2) a peace officer not employed by the Chicago Police Department.

6. A nonrefundable processing fee of $15.00 per firearm must accompany each application.

7. A check or money order in the amount of the applicable fee per number of applications must be submitted at the time of application. Make the check or money order payable to the CITY OF CHICAGO. DO NOT SEND CASH.

APPLY IN PERSON OR MAIL APPLICATIONS - Mail the entire unfolded application in an 8 1/2 x 11 envelope with your return address to:
Chicago Police Department
Gun Registration Program, Unit 163
3510 S. Michigan Ave., Room 1027 SE
Chicago, Illinois 60653
Telephone: (312) 745 - 5164
Office Hours: 8:30 a.m. to 3:30 p.m. Monday - Friday

8. List the complete address where the firearm will be located.

NOTE: A person shall file an annual registration report with the Superintendent on a form, and in a manner, prescribed by the Superintendent. The annual registration report shall set forth such information as required by the Superintendent in rules and regulations. If a person has multiple registration certificates, the Superintendent may align the dates for the annual registration reports to the same reporting date and combine such annual registration reports into one report.

Failure to file an annual registration report may result in revocation of a person's CFP or registration certificate, and may cause that firearm to become unregisterable to that person.

If the firearm is an antique as defined in MCC-8-20-010, you must provide additional documentation which lists the date of manufacture.

Please indicate the number of persons under the age of 18 that currently reside in the residence where the weapons will be kept?

Please indicate the number of persons age 18 or over that currently reside in the residence where the weapons will be kept?

COMPLETE THIS SECTION WHEN REGISTERING A NEWLY ACQUIRED FIREARM OR TRANSFERRING A REGISTERED FIREARM.

GUN WAS OBTAINED FROM - NAME (LAST-FIRST-M.I.) - DATE

STREET ADDRESS

CITY - STATE

GUN WAS POSSESSED IN CHICAGO BY ME ON - DATE

GUN OBTAINED BY PURCHASE ☐ GIFT ☐ INHERITED ☐

HAS WEAPON BEEN REGISTERED IN CHICAGO ☐ YES ☐ NO

PREVIOUS REGISTRATION NO.

Under penalties as provided by law, I certify that I have answered all questions truthfully, correctly, and completely. I am not ineligible to possess a firearm under any federal, state or local law, statute or ordinance. I understand that any falsification of information in this application may subject me to a fine and/or jail term.

APPLICANT'S SIGNATURE

DATE

X

AUTHORIZED APPROVER SIGNATURE

STAR NO./EMP. NO.

UNIT/DISTRICT

FOR OFFICE USE ONLY

VISION CHECK BY - STAR/EMP. NO.

FOID CHECK BY - STAR/EMP. NO.

IDENTIFICATION CHECK BY - STAR/EMP. NO.

FEE SUB. CHECK BY - STAR/EMP. NO.

REGISTRATION CHECK BY - STAR/EMP. NO.

TRAINING VERIFICATION CHECK BY - STAR/EMP. NO.