IDAHO CONCEALED WEAPONS LICENSE APPLICATION INFORMATION

Twin Falls County Sheriff's Office- Concealed Weapons License Section (CWL)

(at the DMV Driver's License side)

630 Addison Ave. W., Twin Falls, Idaho 83301

P.O. Box AE, Twin Falls, Idaho 83303

SSgt. Doug Sugden, 208-735-4866

If you have any questions regarding the Enhanced, Regular, or Under 21 Concealed Weapons License, training, applying, renewing, or any general questions, contact SSgt. Doug Sugden to answer your questions.

Twin Falls County Sheriff's DOES NOT accept on-line courses for CWL proof of training

Applicants please read all instructions prior to filling out your CWL application.

List your physical residence, not your mailing address.

DO NOT SIGN OR DATE YOUR APPLICATION. The Deputy/Clerk will need to witness your signature.

The **"Training Certificate of Completion"** page is for the Enhanced and Under 21 CWL. The certificate is typically received during the ECWL training. If you need one, please ask or download it off the Idaho State Police or Twin Falls County Sheriff websites.

1. **FIRST TIME APPLICANTS:**
   - **Contact SSgt. Doug Sugden at 208-735-4866 for an appointment.** No interview- For convenience only.
   - Bring your completed application and training certificate (Enhanced/Underage CWL) or proof of firearms training (Regular CWL). Be sure to read all the information provided and fill out required information. Bring your driver's license.
   - **You will be fingerprinted at the time of your appointment. PLEASE BE SURE YOUR HANDS ARE IN GOOD CONDITION AT THE TIME OF YOUR APPOINTMENT TO MINIMIZE CHANCES OF REJECTION FROM THE FBI.**
   - A fee of **$62.45** will be collected at the time of your appointment ($39.75 for Federal check, $20.00 for Sheriff's Office check, $2.70 for issue fee). You may pay with cash, local personal check, or credit/debit card **(extra $1 + 3% fee with credit/debit)**. **Should you be rejected for your CWL, there will be no refunds.**
   - New applicants will be contacted within 90 days after the date the application was submitted and an appointment will be made to issue the CWL.
2. **RENEWAL APPLICANTS:**
   - **An appointment is not needed. A completed CWL application can be submitted to a clerk at Driver's License for renewal** within **90 days before or after the expiration** date listed on the CWL. A fee of **$37.70** will be collected when you submit your renewal application ($20.00 for State check, 15.00 for Sheriff's Office check, $2.70 for issue fee). You may pay with cash, local personal check, or credit/debit card **(extra $1 + 3% fee with credit/debit). Should you be rejected for your CWL, there will be no refunds.**
   - Any CWL expired 91 days or more will pay a late fee of $10.00.
   - The applicant will be contacted within 30 days and an appointment will be made to issue the CWL.
   - **PERMITS EXPIRED 181 DAYS OR MORE WILL HAVE TO APPLY AS A NEW APPLICANT. Keep track of your expiration date!**

CARRYING YOUR CONCEALED WEAPON LICENSE

- You will need the Enhanced CWL to carry on college campuses; Enhanced/Standard to carry out of state. Check the Idaho State Police website for current reciprocity listing.
- If your CWL is lost or stolen, please contact SSgt. Doug Sugden @ 208-735-4866.
- **It is suggested that you keep your weapon concealed.** If you accidentally or intentionally display your weapon to others, you might expect that a police officer will contact you.

NAME CHANGE OR ADDRESS CHANGE

- If your legal name changes or your address has changed, please contact Driver's License.

CARRYING IN OTHER STATES

- It is the responsibility of the Licensee to seek other States' rules and regulation regarding Idaho's Concealed Weapons Licenses. **DO NOT ASSUME** it will be honored in other states. Contact each individual State's Attorney General's Office for more information.

PLEASE REFER TO IDAHO CODE 18-3302 AT http://www.legislature.idaho.gov/idstat/TOC/IDStatutesTOC.htm AND FEDERAL RULES AND REGULATION 18 USC SECTION 921-922 FOR COMPLETE CONCEALED WEAPON LAWS.

STATE OF IDAHO
CONCEALED WEAPONS LICENSE APPLICATION

COUNTY OF ISSUE		Application Type: Initial ☐ Renewal ☐ License: 18-3302 Concealed ☐ 18-3302K Enhanced Concealed ☐			
Last Name	First Name and Middle Initial	Date of Birth	Place of Birth	SSN (optional)	
Aliases: Any name used or known by		Sex	Weight	Height	Hair	Eyes
Address		D/L or ID Card Number	Military Status		
City, State Zip		Country of Citizenship	Alien or Admission Number		
CAUTION: Federal and state laws on the possession of weapons and firearms differ. If you are prohibited by federal law from possessing a weapon or a firearm, you may be prosecuted in federal court. A state permit is not a defense to a federal prosecution.		List all firearms training including the date completed:			

NOTE: According to Federal Code, 18 USC Sec. 921-922, the following persons are prohibited from receiving a firearm: fugitives from justice; persons who are unlawful users of or are addicted to narcotics or any other controlled substances; persons adjudicated as a mental defective or who have been committed to a mental institution; persons who have been convicted in any court of a crime punishable by imprisonment for a term exceeding one (1) year; persons who are under indictment for a crime punishable by imprisonment for a term exceeding one (1) year; military veterans discharged under dishonorable conditions; persons who have renounced U.S. citizenship; aliens illegally in the U.S.; persons subject to a court order that restrains them from harassing, stalking, or threatening an intimate partner or child of such intimate partner; and persons convicted in any court of misdemeanor crime of domestic violence.

APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS

YES	NO	(check appropriate box)
		Are you under twenty-one (21) years of age?
		Have you been a legal resident of the state of Idaho for at least six (6) consecutive months, or hold a current concealed weapons license or permit in the state of residency, before filing this application? (For Enhanced Concealed Carry only)
		Are you formally charged with a crime punishable by imprisonment for a term exceeding one (1) year?
		Have you ever been adjudicated guilty in any court of a crime punishable by imprisonment for a term exceeding one (1) year?
		Are you a fugitive from justice?
		Are you an unlawful user of or addicted to marijuana or any depressant, stimulant or narcotic drugs, or any other controlled substance as defined in 21 U.S.C. 802?
		Are you currently suffering from or have you been adjudicated as having suffered from any of the following conditions, based on substantial evidence: (1) lacking mental capacity as defined in Section 18-210, Idaho Code; (2) mentally ill as defined in Section 66-317, Idaho Code; (3) gravely disabled as defined in Section 66-317, Idaho Code; or (4) an incapacitated person as defined in Section 15-5-101, Idaho Code?
		Have you been discharged from the armed forces under dishonorable conditions?
		Have you received a period of probation after having been adjudicated guilty of, or received a withheld judgment for a misdemeanor offense that has an element of intentional use, attempted use or threatened use of physical force against the person or property of another and NOT successfully completed probation?
		Are you an alien illegally in the United States?
		Have you, having been a citizen of the United States, renounced your citizenship?
		Are you free on bond or personal recognizance pending trial, appeal or sentencing for a crime which disqualifies you from obtaining a concealed weapon license?
		Are you a respondent to a protection order issued under chapter 63, title 39, Idaho code or a similar order in another jurisdiction?
		Have you ever been convicted in any court of a misdemeanor crime of domestic violence?
		Are you eligible to own, possess or receive a firearm under Idaho and federal law?

List all states you have lived in during the past ten (10) years:

Under penalty of Idaho Code 18-3302 C (2), I certify I have read the entire text of this form and my statements set forth are true and correct. This application may take a minimum of ninety (90) days to process.

SIGNATURE OF APPLICANT _____ DATE _____

Do not write in this space

☐ This applicant has provided completion documentation of the required training for the license type.

☐ Approved ☐ Denied Reason for denial _____

SIGNATURE OF SHERIFF OR DESIGNEE _____ DATE_____