

**Unofficial Draft Copy**

As of: June 18, 2012 (12:06pm)

LCIj 06

\*\*\*\* Bill No. \*\*\*\*

Introduced By \*\*\*\*\*

By Request of the \*\*\*\*\*

1 A Bill for an Act entitled: "An Act eliminating the requirement that an application for a permit to carry a  
2 concealed weapon include the applicant's social security number; amending section 45-8-322, MCA."  
3

4 Be it enacted by the Legislature of the State of Montana:  
5

6 **Section 1.** Section 45-8-322, MCA, is amended to read:

7 **"45-8-322. Application, renewal, permit, and fees.** (1) The application form must be readily  
8 available at the sheriff's office and must read as follows:

9 CONCEALED WEAPON PERMIT APPLICATION  
10

11 To be completed by each person making application:

12 RESIDENT OF MONTANA AT LEAST 6 MONTHS ( ) Yes ( ) No

13 CITIZEN OF THE UNITED STATES ( ) Yes ( ) No

14 18 YEARS OF AGE OR OLDER ( ) Yes ( ) No

15 PLEASE TYPE OR PRINT

16 Full name: .....

17 Last First Middle

18 Alias/Maiden/Nickname: .....

19 Address: Home: ..... Zip .....

20 Employer: ..... Zip .....

21 Phone: ...../ ...../ .....

22 Home Employer Message

23 Place of birth:..... Date of birth: .....

24 Driver's license

25 :..... Issuing state: .....

26 ~~Social Security~~

27 :.....

28 Sex ..... Ht. .... Wt. .... Eyes ..... Hair .....

29 LIST EACH FORMER EMPLOYER OR BUSINESS ENGAGED IN FOR THE LAST 5 YEARS:

30 Employer or

31 business name Address Dates of employment 1. ....

32 2. ....

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1 3. ....

2 4. ....

3 5. ....

4 6. ....

5 LIST EACH PLACE IN WHICH YOU HAVE LIVED FOR THE LAST 5 YEARS:

6 City State Dates of residence

7 1. ....

8 2. ....

9 3. ....

10 4. ....

11 5. ....

12 6. ....

13 MILITARY SERVICE, BRANCH ..... FROM ..... TO .....

14 TYPE OF DISCHARGE ..... RANK UPON DISCHARGE .....

15 HAVE YOU EVER BEEN ARRESTED FOR OR CONVICTED OF A CRIME OR FOUND GUILTY IN A  
16 COURT-MARTIAL PROCEEDING?

17 ( ) YES ( ) NO

18 IF YES, COMPLETE THE FOLLOWING (Exceptions: minor traffic violations) (Attach additional sheet if  
19 necessary):

20 City State Charge Date

21 1. ....

22 2. ....

23 3. ....

24 4. ....

25 5. ....

26 LIST THREE PERSONS WHOM YOU HAVE KNOWN FOR AT LEAST 5 YEARS THAT WILL BE  
27 CREDIBLE WITNESSES TO YOUR GOOD MORAL CHARACTER AND PEACEABLE DISPOSITION  
28 (DO NOT include relatives or present/past employers):

29 Name Address Phone

30 1. ....

31 2. ....

32 3. ....

33 PLEASE EXPLAIN YOUR REASONS FOR REQUESTING THIS PERMIT (Attach additional sheet if  
34 necessary):

35 .....

36 .....

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1 .....

2 I, the undersigned applicant, swear that the foregoing information is true and correct to the best of my  
3 knowledge and belief and is given with the full knowledge that any misstatement may be sufficient cause  
4 for denial or revocation of a permit to carry a concealed weapon. I authorize any person having  
5 information concerning me that relates to the information requested by this application and the  
6 requirements for a concealed weapon permit, either public record or otherwise, to furnish it to the sheriff to  
7 whom this application is made.

8 .....

9 Signature

10 .....

11 Date of application

12 This application must be  
13 signed in the presence of  
14 the sheriff or a designee.

15 (2) The application must be in triplicate. The applicant must be given the original at the time the  
16 completed application is filed with the sheriff, the sheriff shall keep a copy for at least 4 years, and a copy  
17 must, within 7 days of the sheriff's receipt of the application, be mailed to the chief of police if the applicant  
18 resides in a city or town with a police force.

19 (3) The fee for issuance of a permit is \$50. The permit must be renewed for additional 4-year  
20 periods upon payment of a \$25 fee for each renewal and upon request for renewal made within 90 days  
21 before expiration of the permit. The permit and each renewal must be in triplicate, in a form prescribed by  
22 the department of justice, and must, at a minimum, include the name, address, physical description,  
23 signature, driver's license number, state identification card number, or tribal identification card number,  
24 and a picture of the permittee. A person in the United States armed forces satisfies the requirement of  
25 submitting a picture if the person submits pictures of the front of the person's military identification card  
26 and the person's Montana driver's license. The permit must state that federal and state laws on  
27 possession of firearms and other weapons differ and that a person who violates the federal law may be  
28 prosecuted in federal court and the Montana permit will not be a defense. The permittee must be given the  
29 original, and the sheriff shall keep a copy and send a copy to the department of justice, which shall keep a  
30 central repository record of all permits. Replacement of a lost permit must be treated as a renewal under  
31 this subsection.

32 (4) The sheriff shall conduct a background check of an applicant to determine whether the  
33 applicant is eligible for a permit under 45-8-321, may require an applicant to submit the applicant's  
34 fingerprints, and may charge the applicant \$5 for fingerprinting.

35 (5) Permit, background, and fingerprinting fees may be retained by the sheriff and used to  
36 implement 45-8-321 through 45-8-325.

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1 (6) A state or local government law enforcement agency or other agency or any of its officers or  
2 employees may not request a permittee to voluntarily submit information in addition to that required on an  
3 application and permit."

4 {Internal References to 45-8-322:  
5 45-8-315 \* 45-8-315 \* 45-8-322 \* ok/ddb}

6 - END -

7 {Name : Dave Bohyer  
8 Title : Research Director  
9 Agency : Legislative Service Division  
10 Phone : 444-3064  
11 E-Mail : dbohyer@mt.gov}

12

13 CI0429 2170dbxd.

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8 .....  
9

Signature

10 .....  
11

Date of application

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