



SHELBYVILLE POLICE DEPARTMENT

105 W. TAYLOR ST. SHELBYVILLE, INDIANA 46176

PHONE 317-392-5106

FAX 317-392-3645

HANDGUN PERMIT APPLICATION & FEES

You must fill out an application with the Shelbyville Police Department if you are a resident of Shelbyville, Indiana. The application must be filled out completely or it will be denied. The fees are listed below and the portion paid to the Shelbyville Police Department is due after the application is approved and you come in to sign the state form and get fingerprinted. All state fees are to be sent in with the application to the State of Indiana.

FOUR YEAR PERMIT

Pay to the Shelbyville Police Department: \$10.00 + \$2.00 Public Notary Fee. This can be in the form of cash, personal check, certified check or money order. Debit or credit cards are not accepted.

Pay to the State of Indiana: \$30.00 payable to the State of Indiana. This can only be in the form of a certified check or money order.

LIFETIME PERMIT

IF YOU CURRENTLY POSSESS AN INDIANA HANDGUN PERMIT

Pay to the Shelbyville Police Department: \$40.00 + \$2.00 Public Notary Fee. This can be in the form of cash, personal check, certified check or money order. Debit or credit cards are not accepted.

Pay to the State of Indiana: \$60.00 payable to the State of Indiana. This can only be in the form of a certified check or money order.

IF YOU CURRENTLY "DO NOT" POSSESS AN INDIANA HANDGUN PERMIT

Pay to the Shelbyville Police Department: \$50.00 + \$2.00 Public Notary Fee. This can be in the form of cash, personal check, certified check or money order. Debit or credit cards are not accepted.

Pay to the State of Indiana: \$75.00 payable to the State of Indiana. This can only be in the form of a certified check or money order.



SHELBYVILLE POLICE DEPARTMENT

105 W. TAYLOR ST. SHELBYVILLE, INDIANA 46176

PHONE 317-392-5106

FAX 317-392-3645

REQUEST FOR HANDGUN PERMIT

DATE: _____ DAYTIME TELEPHONE NUMBER: _____

NAME: _____ D.O.B.: _____ AGE: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____ Sex: _____

S.S.#: _____ Driver's Lic.#: _____ Are you a U.S. Citizen? _____

Place of Birth: _____ How long have you been a resident of Indiana? _____

Scars, Marks or Tattoos: _____

NAME & ADDRESS OF YOUR EMPLOYER: _____

Occupation: _____ Number of years with current employer: _____

Have you ever been arrested for any criminal charges including Drunk Driving? _____

On what CHARGES: _____

Are you or have you ever been treated for an emotional or mental illness? _____

If so, give details: _____

PLEASE CHECK ONE:

LIFETIME PERMIT: _____ FOUR YEAR PERMIT: _____ HUNTING TARGET: _____

HAVE YOU PREVIOUSLY HELD AN INDIANA HANDGUN PERMIT? _____

If so, what year? _____ Expiration Date: _____ PERMIT NUMBER: _____

I AFFIRM THIS INFORMATION IS TRUE & CORRECT TO THE BEST OF MY KNOWLEDGE:

APPLICANT'S SIGNATURE: _____ DATE: _____

APPROVED: _____

DISAPPROVED: _____