



Banning Police Department

125 E. Ramsey Street, Banning, CA 92220 (951) 922-3170

Applicant Name: _____

There are two options available for a Concealed Weapon authorization. The Banning Police Department may issue a five year limited ID card for Concealed Weapon authorization within the State of California or a one year limited ID card for Concealed Weapon authorization on a national level per H.R. 218. *(Note: You must check with the local jurisdictions you will be visiting, as some may not recognize this privilege).*

In order to obtain a Concealed Weapon authorization, the following requirements must be met:

- Application made within seven (7) years of retirement (due to purging of Employee Files)
- Successful Concurrent Firearm Course Qualification
- If applying for H.R. 218, must meet the necessary criteria mentioned in the Act

Please select your choice of authorization:

- ☐ **Option #1:** Qualify, with the Banning Police Department's Range Staff, on a basic course to obtain your privilege to carry a concealed firearm locally. **This privilege will expire in five (5) years**, at which time you will need to re-qualify at the Banning Police Department to obtain a new I.D. card.

Expiration Date: _____

- ☐ **Option #2:** Qualify, with the Banning Police Department's Range Staff, on a H.R. 218 compliant course to obtain your privilege to carry a concealed firearm on a national level. **This privilege will expire in one (1) year**, at which time you will need to re-qualify at the Banning Police Department to obtain a new I.D. card.

Expiration Date: _____

Final Approval will be made by the Chief of Police after assessment of this application.

Print Name

Signature Date

Official Date of Retirement

Reason for Retirement

Approved/Not Approved

Chief of Police Date

Met Firearm Qualification- YES / NO

BPD Range Master Date

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RETIRED ID RENEWAL REQUEST

ID Number _____ Expiration Date _____

Name _____ Date of Birth _____

Retirement Date _____ Rank _____

Home Address _____ Phone _____

City _____ State _____ Zip _____ Cell Phone _____

Employer _____ Occupation _____

Work Address _____ Phone _____

City _____ State _____ Zip _____

Height _____ Weight _____ Eyes _____ Hair _____

CCW Privilege Requested: Yes ☐ No ☐

Type of CCW Requested? Standard CCW ☐ H.R. 218 ☐

Applicant Signature

(DO NOT WRITE BELOW THIS LINE)

Date Issued: _____

Expiration Date: _____

Retired Officer Declaration Signed: ☐

CCW Approved: ☐

Old ID Card Surrendered: _____

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Signature – Chief of Police

Date

RETIRED OFFICER DECLARATION

I, _____, declare that I have been advised that should I suffer or experience any of the conditions listed in Items 1, 2 or 3 below, I must promptly notify the Office of the Chief of Police thereof. My failure to do so will automatically result in termination of my privilege to carry a concealed firearm as delineated in Sections 26300 PC and 25850 PC of the California Penal Code ten (10) days after the occurrence of the condition and my failure to notify the Department.

1. Suffered an emotional or nervous disorder; or
2. Been committed, either voluntarily or involuntarily, to any hospital, mental institution or other facility for treatment of a mental or emotional disorder or for the use of alcohol, drugs or narcotics; or
3. Violating any Department rules, state or federal laws that, if violated by an officer on active duty, would result in that officer's arrest, suspension, or removal from the agency.

I understand that I must petition the Banning Police Department if I desire to renew my identification card every five (5) years for local/state CCW permit, or every one (1) year for H.R. (national) CCW permit.

I further understand that the Office of the Chief of Police must be notified immediately should any identification card and/or badge be lost or stolen.

Signature

Date

Print Name

Home Address

City/State/Zip Code

Phone Number

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**Banning police department
Firearms Qualifications Record**

Date: _____

Officer: _____

Weapons qualified with:

**I have read and understand the Banning Police Department's Use of Force and Firearm's Safety Policy & Procedures.* _____

Officer Signature

Rangemaster