



POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
PISTOL LICENSING BUREAU
30 YAPHANK AVENUE YAPHANK NEW YORK 11980
PHONE: 631-852-6311 FAX: 631-852-6670 SUFFOLK COUNTY WEBSITE: www.suffolkcountyny.gov
OFFICE HOURS: MONDAY TO FRIDAY 9:00 AM TO 4:30 PM



PDCS-4024

REQUIREMENTS FOR SELF PROTECTION - FULL CARRY LICENSE

If you are seeking a SELF-PROTECTION license, you will be required to show "proper cause" pursuant to Penal Law Section 400.00 Sub. 2 (f). "Proper cause" is determined by a review of all relevant information bearing on your claimed need. You must show that you are exposed to extraordinary personal danger, documented by proof of recurrent threats to life or safety, requiring authorization to carry a firearm.

These factors are not all-inclusive, and the Police Commissioner will consider other proof, including Suffolk County Police Department records. It should be noted, however, that the fact that you have been the victim of a crime or reside or are employed in a "high crime area" or participate in a controversial activity does not, in itself, establish "proper cause" for the issuance of a self-protection license.

The following information must be submitted to the Suffolk County Police Department Pistol Licensing Bureau in support of your request for a Self-Protection license:

1. NOTARIZED LETTER OF NECESSITY

- A.** Articulate your reason(s) for requesting SELF-PROTECTION license, including all of the following information:
 - a. Circumstances behind the request.
 - b. Name, address, telephone number and employer of person(s) that you need protection from, if known.
 - c. Is the person you fear related to you?
 - d. When did the first incident occur?
 - e. Number and type of threats and when they occurred.
 - f. Number, type(s) of complaint(s) and date(s) of previous police report(s) made.
 - g. List all previous arrests and charges relating to the incidents or threats, if any.
 - h. List all previous court actions and their results relating to the incidents or threats, if any.
 - i. Statement indicating the applicant has read and is familiar with the provisions of the NEW YORK STATE PENAL LAW, ART. 35 (USE OF FORCE), ART. 265 (CRIMINAL POSSESSION AND USE OF A FIREARM), ART. 400 (RESPONSIBILITIES OF A HANDGUN LICENSEE) AND THE PISTOL LICENSE INFORMATION HANDBOOK.

2. SUPPORTING LETTERS OF WITNESSES

- A.** Name, address, telephone number and notarized statements or letters of actual witnesses that can confirm that recurrent threats have occurred to your life or safety.
- B.** Documentation from District Attorney's Office or other law enforcement or governmental agency that recommends and can support your request for a self-protection license.

If a Self-Protection license is approved, the Suffolk County Police Pistol Licensing Bureau may withdraw that classification at any time if it finds proper cause no longer exists. Proper cause will have to be demonstrated by you each time the license is renewed, every five years. If proper cause is no longer proven, the license will be changed to a different classification of license.

FAILURE TO SUPPLY ALL INFORMATION REQUESTED WILL NOT ONLY DELAY THIS ENDORSEMENT REQUEST, IT MAY RESULT IN A DENIAL. IF ANY INFORMATION REQUESTED IS NOT KNOWN, SO INDICATE.

If you are applying for a new license - submit all the above documentation with your application.

If you are amending a current license - submit the above documentation, in person, with a check or money order for \$5.00 payable to the Suffolk County Police Department. Upon completion of the investigation, you will be notified of the results by mail.