

Westchester County Police Pistol License Unit

Background Investigation Worksheet

OFFICE USE ONLY			
CASE#:			
DET:			

Please answer the following questions. Do not leave any question blank. If any question does not apply, write N/A. Attach additional sheets if necessary. False statements anywhere on this form are grounds for license denial; Penal Law §400.00(1)(o).

APPLICANT INFORMATION:

Last Name:			_First Name:		M.I
Address:	STREET	C/T/V		STATE	ZIP
Birth Date:		Sex:	Social Securit	y#:	
Height:	Weight:	Eye C	Color:	Hair Color:	
Place of Birth:		E-Ma	il:		
Telephone (Cell):			_Tel. Home:		
Driver License/Non-	Driver ID #:			State:	
Other Names You H	ave Used:				
Race: Black	White	Asian/Pac	ific Islander	American Indian/	Alaskan Native
Ethnicity: H	ispanic 🗌 Nor	n-Hispanic			
Marital Status:	Single	Married	Separated	Divorced	Widowed
Citizenship:					
 Citizen by Birth Naturalized Citiz Resident Alien 		lization Numb Registration N			

List Previous Home Addresses:

				/
STREET	C/T/V	STATE	ZIP	FROM TO
				/
STREET	C/T/V	STATE	ZIP	FROM TO
				/
STREET	C/T/V	STATE	ZIP	FROM TO
Employment Information	(if unemployed list	t nrevious employer)	•	
	(in unemployed, its)	previous employer)	•	
Employer Name:				
Address				
Address:		C/T/V	STATE	ZIP
Occupation:	YO	our Job Title:		
Telephone:	En	nployed (From):	To): <u> </u>
Success on domostic nontre				
Spouse or domestic partne				
Last Name:		First Name:		МТ
Last Name:		First Ivallie:		IVI.1
DOD.	4 ~~~	Deletion to your		
DOB:	Age:	Kelation to you:		
Telephone (Cell):		Emaile		
Adults living in the reside	nce (including adult	t children):		
Last Name:		First Name:		M.I
DOB:	Age:	Relation to you:		
Telephone (Cell):		Email:		

Last Name:		First Name:	M.I
DOB:	Age:	Relation to you:	
Telephone (Cell):		Email:	
Last Name:		First Name:	M.I
DOB:	Age:	Relation to you:	
Telephone (Cell):		Email:	
Have you successfully compl course? (Penal Law §400.00 Yes No (Attach co	(19))		
How and where will firearm (Laws of Westchester, Chapte			

Please answer the following questions. If any answer is YES, attach a detailed, notarized letter of explanation and copies of any related documents, e.g. arrest disposition, incident reports, etc. False statements are grounds for license denial.

HAVE YOU EVER:

1.	Applied for or held a pistol, rifle, firearm dealer or gunsmith license anywhere?	Yes No
2.	Had any government-issued license denied, suspended or revoked?	Yes No
3.	Served in the military of the United States or a foreign country, or been rejected for military service?	🗌 Yes 🗌 No
4.	Been arrested, summonsed, charged with or investigated for ANY offense, other than parking violations, anywhere (including dismissed & sealed cases)?	Yes No
5.	Been involved in significant conflict with another person, or with a member of your household?	Yes No
6.	Promoted violence anywhere, including on any website or social media platform, using your actual name or an assumed name?	🗌 Yes 🗌 No
7.	Suffered from or were treated for any form of mental illness, stress-related disorder or condition involving emotion or behavior control?	Yes No
8.	Attempted suicide, or seriously considered attempting suicide?	Yes No
9.	Sought or obtained treatment for drug or alcohol use or were addicted to drugs or alcohol?	🗌 Yes 🗌 No
10.	Been a petitioner or respondent in a Family Court proceeding?	🗌 Yes 🗌 No
11.	Had an Order of Protection issued for you or against you?	🗌 Yes 🗌 No
	DO YOU PRESENTLY:	
12.	Use narcotics, controlled substances, marijuana or its derivatives or other substances illegally?	Yes No
13.	Suffer from any disability or condition that may affect your ability to safely possess, use or secure a firearm?	Yes No
14.	Been arrested, summonsed, charged with or investigated for any offense having as a factor: weapons, drugs, physical injury, force, aggression or threats (including dismissed & sealed cases)?	🗌 Yes 🗌 No
15.	Been involved in significant conflict with another person, or with a member of your household?	Yes No
16.	Promoted violence anywhere, including on any website or social media platform, using your actual name or an assumed name?	🗌 Yes 🗌 No
17.	Suffered from or were treated for any form of mental illness, stress-related disorder or condition involving emotion or behavior control?	🗌 Yes 🗌 No

18.	Attempted suicide, or seriously considered attempting suicide?	Yes No
19.	Sought or obtained treatment for drug or alcohol use or were addicted to drugs or alcohol?	🗌 Yes 🗌 No
20.	Had an Order of Protection issued for them or against them?	Yes No
	ARE YOU AWARE OF:	
21.	Any circumstance in your life, family or household that could affect your ability to safely possess, use or secure a firearm?	🗌 Yes 🗌 No

Applicant Name (Print)

Applicant Name (Sign)

STATE OF NEW YORK)COUNTY OF WESTCHESTER)

Subscribed and Sworn to Before Me This:

Day of: _____ Year: _____

WESTCHESTER COUNTY POLICE POLICE	WESTCHESTER COUNTY POLICE PISTOL LICENSE UNIT CHARACTER REFERENCE LETTER	OFFICE USE ONLY CASE#: DET:
PISTOL LICEN	ISE APPLICANT:	

Last Name:Fi		First N	Jame:	M.I
Address:				
	STREET	C/T/V	STATE	ZIP

THIS SECTION TO BE COMPLETED BY THE CHARACTER REFEREE:

<u>Notice</u>: You are unsuitable as a character referee if you are related to the applicant by blood or marriage. A maximum of one member of any family or household may serve as a character referee.

Last Name:		First Name:		N	M.I	
Address:						
STREET		C/T/V	STATE	ZIP		
Date of Birth:		Social Secur	rity # (last four digi	ts):		
Telephone (Cell):		Ema	il:			
Employer Name:		Occupation:				
Employer Address:						
	STREET		C/T/V	STATE	ZIP	
How do you know the a	applicant and fo	or how long? Ex	xplain.			

How often do you interact with the applicant in person? Explain.

HAS THE APPLICANT EVER:

Been arrested, had negative contacts with the criminal justice system, or had adverse incidents in his/her lifetime? If yes, explain.

Been involved in significant conflict with another person, or with a member of his/her household? If yes, explain.

Promoted violence anywhere, including on any website or social media platform, using his/her actual name or an assumed name? If yes, explain.

Acted in a way that is aggressive, threatening, violent or abnormal? If yes, explain.

Acted in a way that suggests mental illness, stress-related condition or emotion or behavior control condition? If yes, explain.

Used narcotics, controlled substances, marijuana, medications or other substances illegally? If yes, explain.

Sought or obtained treatment for drug or alcohol use or abused drugs or alcohol? If yes, explain.

IN YOUR OPINION:

Does the applicant have the temperament and judgement necessary to be entrusted with a firearm and to use it only in a manner that does not endanger anyone? Explain.

Referee Name (Print)

Referee Name (Sign)

STATE OF NEW YORK)COUNTY OF WESTCHESTER)

Subscribed and Sworn to Before Me This:

WESTCHESTER COUNTY POLICE POLICE	WESTCHESTER COUNTY POLICE PISTOL LICENSE UNIT CHARACTER REFERENCE LETTER	OFFICE USE ONLY CASE#: DET:
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Last Name:Fi		First N	Jame:	M.I
Address:				
	STREET	C/T/V	STATE	ZIP

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Address:					
STREET		C/T/V	STATE	ZIP	
Date of Birth:		Social Secur	rity # (last four digi	ts):	
Telephone (Cell):		Ema	il:		
Employer Name:			Occupation:		
Employer Address:					
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Last Name:		First N	Jame:	M.I
Address:				
	STREET	C/T/V	STATE	ZIP

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Address:					
STREET		C/T/V	STATE	ZIP	
Date of Birth:		Social Secur	rity # (last four digi	ts):	
Telephone (Cell):		Ema	il:		
Employer Name:			Occupation:		
Employer Address:					
	STREET		C/T/V	STATE	ZIP
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STATE OF NEW YORK)COUNTY OF WESTCHESTER)

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Address:					
STREET		C/T/V	STATE	ZIP	
Date of Birth:		Social Secur	rity # (last four digi	ts):	
Telephone (Cell):		Ema	il:		
Employer Name:			Occupation:		
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Referee Name (Print)

Referee Name (Sign)

STATE OF NEW YORK)COUNTY OF WESTCHESTER)

Subscribed and Sworn to Before Me This:



George Latimer **County Executive** Department of Public Safety Terrance Raynor Commissioner/Sheriff

OFFICE USE ONLY:

Case #:

Detective:

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, , do hereby authorize and grant full disclosure of all records concerning myself to the Westchester County Department of Public Safety, regardless of whether such records are public, private, sealed or confidential.

The intent of this authorization is to grant my consent to full and complete disclosure of any and all records concerning myself. This includes, but is not limited to, records pertaining to crimes and offenses, my education, medical, mental health and/or psychiatric history and treatment, records of the United States Armed Forces or military, records related to my past or current employment and pre-employment, including background reports, efficiency ratings, evaluations, complaints or grievances filed by or against me, and records of my activity on the Internet and on social media using my name or an assumed name.

I certify that any person or agency who may furnish any such information concerning myself shall not be held liable or accountable for providing this information and I hereby release any such person or agency from any and all liability on account of having provided such information. I further release the Westchester County Department of Public Safety and its individual employees from any and all liability on account of having collected, used or disseminated such information.

A PHOTO-COPY OF THIS RELEASE WILL BE VALID AS AN ORIGINAL THEREOF, EVEN THOUGH SAID PHOTO-COPY DOES NOT CONTAIN AN ORIGINAL WRITING OF MY SIGNATURE.

I have read and fully understand the contents of this Authorization for Release of Personal Information.

Person Authorizing Release of Information (signature)

STATE OF NEW YORK COUNTY OF WESTCHESTER)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ YEAR___

Department of Public Safety Pistol License Unit 110 Dr. Martin Luther King Jr. Blvd, 3rd Fl. White Plains, NY 10601

SIGNATURE OF NOTARY PUBLIC

Telephone: (914) 995-2709 Website: westchestergov.com







	<u>0</u>	FFICE USE ONLY:
George Latimer		
County Executive	Case #:	
Department of Public Safety		
Terrance Raynor	Detective:	
Commissioner/Sheriff		
	Email:	@westchestergov.com

REQUEST FOR RECORDS CHECK

То:_____

The below listed person has applied to Westchester County for a pistol license. As per NYS Penal Law 400.00(4), a background investigation on the person is being conducted by this agency. Please search your records for any information on the named person. Pursuant to NYS Criminal Procedure Law section 160.50(1)(d)(iii), because the person is under investigation for a pistol license, all records are to be made available to this agency including any that were dismissed, sealed by the court or adjudicated youthful offender. Please send us copies of all records in your possession by **Fax at 914-995-6257 or by email at the above listed email address**. You may also reach us by telephone at 914-995-2709. Please include this form with your response.

This agency does not possess any information on the below listed person.

The agency is in possession of the following information on the below listed person.

Person completing records check:		
Name:	Title:	Date:
APPLICANT: PLEASE	E COMPLETE THE BELOW LIST	ED INFORMATION:
Name (Last):	First:	M.I
Address:		
Sex: Date of Birth:	Social Sec	urity #:
Other Names You Have Been Know	n By:	
Department of Public Safety Pistol License Unit 110 Dr. MLK Jr. Blvd, 3 rd Fl. White Plains, NY 10601	Telephone: (914) 995-2709 Website: westchestergov.com	

Affidavit

Receipt of Penal Law §400.00(18) Notifications

State of New York)		
County of Westchester) ss.:)		
I,			, residing at
APPI	LICANT / LICENSEE		
STREET	CITY	STATE	ZIP

do hereby attest to the receipt of the Penal Law §400.00(18) Notifications consisting of copies of New York State Penal Law sections 265.01-D and 265.01-E, notices pursuant to New York State Penal Law section 400.00(18)(b), Laws of Westchester County sections 527.61(2) and 529.21(a) setting forth firearm and long-gun safe storage requirements; the places where carrying a firearm is prohibited; the grounds upon which a firearm license can be revoked for carrying a firearm in prohibited places; and the document titled Pistol License Safety and Information Handbook for Westchester County setting forth licensing procedures and my responsibilities as a firearm licensee.

Applicant / Licensee Signature

SUBSCRIBED AND SWORN TO BEFORE ME THIS

_____ day of _____ Year _____

SIGNATURE NOTARY PUBLIC

New York State Penal Law §265.01-D

Criminal possession of a weapon in a restricted location

§ 265.01-d Criminal possession of a weapon in a restricted location.

1. A person is guilty of criminal possession of a weapon in a restricted location when such person possesses a firearm, rifle, or shotgun and enters into or remains on or in private property where such person knows or reasonably should know that the owner or lessee of such property has not permitted such possession by clear and conspicuous signage indicating that the carrying of firearms, rifles, or shotguns on their property is permitted or has otherwise given express consent.

2. This section shall not apply to:

(a) police officers as defined in section 1.20 of the criminal procedure law;

(b) persons who are designated peace officers as defined in section 2.10 of the criminal procedure law;

(c) persons who were employed as police officers as defined in section 1.20 of the criminal procedure law, but are retired;

(d) security guards as defined by and registered under article seven-A of the general business law who has been granted a special armed registration card, while at the location of their employment and during their work hours as such a security guard;

(e) active-duty military personnel;

(f) persons licensed under paragraph (c), (d) or (e) of subdivision two of section 400.00 of this chapter while in the course of his or her official duties; or

(g) persons lawfully engaged in hunting activity.

Criminal possession of a weapon in a restricted location is a class E felony.

New York State Penal Law §265.01-E

Criminal possession of a firearm, rifle or shotgun in a sensitive location

§ 265.01-e Criminal possession of a firearm, rifle or shotgun in a sensitive location.

1. A person is guilty of criminal possession of a firearm, rifle or shotgun in a sensitive location when such person possesses a firearm, rifle or shotgun in or upon a sensitive location, and such person knows or reasonably should know such location is a sensitive location.

2. For the purposes of this section, a sensitive location shall mean:

(a) any place owned or under the control of federal, state or local government, for the purpose of government administration, including courts;

(b) any location providing health, behavioral health, or chemical dependance care or services;

(c) any place of worship or religious observation;

(d) libraries, public playgrounds, public parks, and zoos;

(e) the location of any program licensed, regulated, certified, funded, or approved by the office of children and family services that provides services to children, youth, or young adults, any legally exempt childcare provider; a childcare program for which a permit to operate such program has been issued by the department of health and mental hygiene pursuant to the health code of the city of New York;

(f) nursery schools, preschools, and summer camps;

(g) the location of any program licensed, regulated, certified, operated, or funded by the office for people with developmental disabilities;

(h) the location of any program licensed, regulated, certified, operated, or funded by office of addiction services and supports;

(i) the location of any program licensed, regulated, certified, operated, or funded by the office of mental health;

(j) the location of any program licensed, regulated, certified, operated, or funded by the office of temporary and disability assistance;

(k) homeless shelters, runaway homeless youth shelters, family shelters, shelters for adults, domestic violence shelters, and emergency shelters, and residential programs for victims of domestic violence;

(l) residential settings licensed, certified, regulated, funded, or operated by the department of health;

(m) in or upon any building or grounds, owned or leased, of any educational institutions, colleges and universities, licensed private career schools, school districts, public schools, private schools licensed under article one hundred one of the education law, charter schools, non-public schools, board of cooperative educational services, special act schools, preschool special education programs, private residential or non-residential schools for the education of students with disabilities, and any state-operated or state-supported schools;

(n) any place, conveyance, or vehicle used for public transportation or public transit, subway cars, train cars, buses, ferries, railroad, omnibus, marine or aviation transportation; or any facility used for or in connection with service in the transportation of passengers, airports, train stations, subway and rail stations, and bus terminals;

(o) any establishment issued a license for on-premise consumption pursuant to article four, four-A, five, or six of the alcoholic beverage control law where alcohol is consumed and any establishment licensed under article four of the cannabis law for on-premise consumption;

(p) any place used for the performance, art entertainment, gaming, or sporting events such as theaters, stadiums, racetracks, museums, amusement parks, performance venues, concerts, exhibits, conference centers, banquet halls, and gaming facilities and video lottery terminal facilities as licensed by the gaming commission;(q) any location being used as a polling place;

(r) any public sidewalk or other public area restricted from general public access for a limited time or special event that has been issued a permit for such time or event by a governmental entity, or subject to specific, heightened law enforcement protection, or has otherwise had such access restricted by a governmental entity, provided such location is identified as such by clear and conspicuous signage;

(s) any gathering of individuals to collectively express their constitutional rights to protest or assemble;(t) the area commonly known as Times Square, as such area is determined and identified by the city of New York; provided such area shall be clearly and conspicuously identified with signage.

3. This section shall not apply to:

(a) consistent with federal law, law enforcement who qualify to carry under the federal law enforcement officers safety act, 18 U.S.C. 926C;

(b) persons who are police officers as defined in subdivision thirty-four of section 1.20 of the criminal procedure law;

(c) persons who are designated peace officers by section 2.10 of the criminal procedure law;

(d) persons who were employed as police officers as defined in subdivision thirty-four of section 1.20 of the criminal procedure law but are retired;

(e) security guards as defined by and registered under article seven-A of the general business law, who have been granted a special armed registration card, while at the location of their employment and during their work hours as such a security guard;

(f) active-duty military personnel;

(g) persons licensed under paragraph (c), (d) or (e) of subdivision two of section 400.00 of this chapter while in the course of his or her official duties;

(h) a government employee under the express written consent of such employee's supervising government entity for the purposes of natural resource protection and management;

(i) persons lawfully engaged in hunting activity, including hunter education training; or

(j) persons operating a program in a sensitive location out of their residence, as defined by this section, which is licensed, certified, authorized, or funded by the state or a municipality, so long as such possession is in compliance with any rules or regulations applicable to the operation of such program and use or storage of firearms.

Criminal possession of a firearm, rifle or shotgun in a sensitive location is a class E felony.

WARNING: RESPONSIBLE FIREARM STORAGE IS THE LAW IN NEW YORK STATE*

WHEN STORED IN A HOME FIREARMS, RIFLES, OR SHOTGUNS MUST EITHER BE STORED WITH A GUN LOCKING DEVICE OR IN A SAFE STORAGE DEPOSITORY OR NOT BE LEFT OUTSIDE THE **IMMEDIATE POSSESSION AND CONTROL OF THE OWNER OR OTHER LAWFUL POSSESSOR IF A CHILD** UNDER THE AGE OF EIGHTEEN RESIDES IN THE HOME OR IS PRESENT, OR IF THE OWNER OR POSSESSOR **RESIDES WITH A PERSON PROHIBITED FROM** POSSESSING A FIREARM UNDER STATE OR FEDERAL LAW. FIREARMS SHOULD BE STORED BY REMOVING THE AMMUNITION FROM AND SECURELY LOCKING SUCH FIREARM IN A LOCATION SEPARATE FROM AMMUNITION. LEAVING FIREARMS ACCESSIBLE TO A CHILD OR OTHER PROHIBITED PERSON MAY SUBJECT YOU TO IMPRISONMENT, FINE, OR BOTH. WHEN STORED IN A VEHICLE OUTSIDE THE OWNER'S **IMMEDIATE POSSESSION OR CONTROL, FIREARMS, RIFLES, AND SHOTGUNS MUST BE STORED IN AN** APPROPRIATE SAFE STORAGE DEPOSITORY AND OUT OF SIGHT FROM OUTSIDE OF THE VEHICLE.

* New York State Penal Law §400.00(18)(b)

WARNING: RESPONSIBLE FIREARM STORAGE IS THE LAW IN WESTCHESTER*

FIREARMS MUST BE STORED WITH A SAFETY LOCKING DEVICE OR IN A SAFE STORAGE DEPOSITORY.

FIREARMS SHOULD BE STORED UNLOADED AND LOCKED IN A LOCATION SEPARATE FROM AMMUNITION.

LEAVING FIREARMS ACCESSIBLE TO A CHILD OR UNAUTHORIZED PERSONS MAY SUBJECT YOU TO IMPRISONMENT, FINE OR BOTH.

* Laws of Westchester County §527.61(2)

WARNING

DISCLOSURE OF SAFETY RISKS RELATED TO WEAPONS OR FIREARMS*

ACCESS TO A WEAPON OR FIREARM IN THE HOME SIGNIFICANTLY INCREASES THE RISK OF SUICIDE, HOMICIDE, DEATH DURING DOMESTIC DISPUTES, AND UNINTENTIONAL DEATHS TO CHILDREN, HOUSEHOLD MEMBERS AND OTHERS.

IF YOU OR A LOVED ONE IS EXPERIENCING DISTRESS AND/OR DEPRESSION, CALL THE CRISIS PREVENTION AND RESPONSE TEAM AT (914) 925- 5959 or THE NATIONAL SUICIDE HOTLINE AT 988.

* Laws of Westchester County § 529.21(a)