



# CITY OF WALLA WALLA

**Walla Walla Police Department**  
Email: [wwpdrecords@wallawalla.gov](mailto:wwpdrecords@wallawalla.gov)

## **Concealed Pistol License Renewal Instruction Sheet** **Covid-19 Stay Home Order**

**(Complete this application only if your CPL is not more than 90 days expired)**

1. **COMPLETE ONLY IF YOU LIVE INSIDE THE CITY LIMITS OF WALLA WALLA OR YOU ARE AN OUT OF STATE RESIDENT WITH A CURRENT WASHINGTON CPL**
  - If you live outside the city limits of Walla Walla, but live in Washington State, you will need to apply at the jurisdiction in which you reside.
2. What the Walla Walla Police Department will need:
  - Completed and signed application packet.
  - **Copy** of Valid Driver's License or state ID card.
    - If your identification lists a different address other than the one you provided on the application, you are required to bring in proof of your address, such as a copy of your water bill that includes your name and address.
    - A copy of your identification will be taken.
  - Copy of your current Washington CPL.
  - Check made payable to the Walla Walla Police Department
    - **\$42.00** for CPL late renewal. (Late is 1-90 days after expiration.)
    - **\$32.00** for CPL renewal. (Can apply up to 90 days before expiration.)
3. ***Please consider providing a phone number and/or an email address on your application so we can reach you should we have any questions.***
4. Mail completed application along with a copy of your valid driver's license or state ID, copy of your current concealed pistol license and a check for correct fee amount to:

**Walla Walla Police Department**  
**Attn: Records Section**  
**54 E. Moore St.**  
**Walla Walla WA 99362**

# Concealed Pistol License Application

Office use only	
ID number	_____
SID number	_____
FBI number	_____
CPL number	_____

**PRINT or TYPE all information**

Application type <input type="checkbox"/> Original application <input type="checkbox"/> Renewal of license <input type="checkbox"/> Late renewal of license <input type="checkbox"/> Replacement license							
Name (Last, First, Middle)				CPL number, if applicable		Expiration date	
Other names by which you have been known (for example: maiden name)				Driver license number		State	
Physical address — required				City		State	ZIP code
Mailing address (if different)				City		State	ZIP code
Date of birth		Birthplace (City, State/Province, Country)			(Area code) Telephone number (optional)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Height ___ feet ___ inches	Weight _____ pounds	Eyes (color)	Hair color	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino			
Race (Check all that apply) <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander							
Email address for concealed pistol license renewal (optional)							
List <b>type and location</b> of all marks, scars, and tattoos							
Residency							
1. Are you a U.S. citizen? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If no, enter country of citizenship _____							
2. Are you a permanent resident alien? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter your permanent resident card number _____							
3. Are you a legal alien temporarily residing in Washington? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter your alien registration/I-94 number _____ and; Enter your alien firearms license number: _____ Expiration date: _____							
Answer the following							
1. Have you ever been convicted in adult court or adjudicated in a juvenile court of a felony, or of the following crimes when committed by one family or household member against another, on or after July 1, 1993: assault in the fourth degree, coercion, stalking, reckless endangerment, criminal trespass in the first degree, or violation of the provision of a protection order or no-contact order restraining the person or excluding the person from a residence? . . . <input type="checkbox"/> Yes <input type="checkbox"/> No							
2. Are you now on bond or personal recognizance pending trial, appeal or sentence for any serious offense as defined in RCW 9.41.010 or for a felony for any crime where the judge can imprison you for more than one year? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							
3. Have you been convicted of 3 or more violations of Washington’s firearms laws within any 5-year period? . . . <input type="checkbox"/> Yes <input type="checkbox"/> No							
4. Are you an unlawful user of, or addicted to, marijuana, or any depressant, stimulant, or narcotic drug, or any other controlled substance? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							
5. Have you ever been adjudicated mentally defective (which includes having been adjudicated incompetent to manage your own affairs) or have you ever been committed to a mental institution? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No							
6. Have you been discharged from the Armed Forces under dishonorable conditions? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							
7. Are you subject to a court order restraining you from harassing, stalking, or threatening your child or an intimate partner or child of such partner? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No							
8. Have you been convicted in any court of a misdemeanor crime of domestic violence? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							
9. Have you ever renounced your United States citizenship? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							
10. Are you an alien illegally in the United States? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No							

Signing this application authorizes the Department of Social and Health Services, as well as mental-health institutions and other health-care facilities, to release information relevant to your eligibility for a concealed pistol license to an inquiring court or law-enforcement agency.

*I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_ **X** \_\_\_\_\_  
 Date and place Applicant signature

**What do I need to apply for a concealed pistol license?**

- Bring a photo ID such as a valid state driver license or ID card.
- Bring your permanent resident card if you are a permanent resident alien.
- If you have an alien firearms license, bring your original passport and United States issued alien number or admission number.
- Bring your original certificate of rehabilitation or firearms restoration orders, if applicable.

**How much does it cost for a concealed pistol license?**

- Original license – \$36
- Renewal license – \$32
- Late renewal license – \$42
- Replacement license – \$10

Plus background check fees. All fees are non-refundable.

**Do I need to get a fingerprint or background check?**

- Yes. The law enforcement agency will take your fingerprints and conduct a background check before they issue an original CPL.
- The background check process will usually be completed within 30 days from the date you apply.
- If you do not have a valid Washington driver license or Washington state identification card or have not been a resident of Washington state for the prior 90 consecutive days, then the process may take up to 60 days.

**Are there any other requirements?**

**Yes.** Your application can be denied if:

- You have a concealed pistol license in a revoked status
- You are under 21 years of age
- You are subject to a court order or injunction concerning the possession of firearms
- You are free on bond or personal recognizance pending trial, appeal, or sentencing for a felony offense
- You have an outstanding warrant for your arrest from any court of competent jurisdiction for a felony or misdemeanor
- You have been ordered to forfeit a firearm within one year before filing a concealed pistol license application

**Who do I contact if I have any questions?**

- Contact your local law enforcement agency or county sheriff's office.

**CAUTION: Although state and local laws do not differ, federal law and state law on the possession of firearms differ. If you are prohibited by federal law from possessing a firearm, you may be prosecuted in federal court. A state license is not a defense to federal prosecution.**

Local law enforcement use only		
Database	Date	Checked by _____
<input type="checkbox"/> NICS	_____	_____
<input type="checkbox"/> WACIC/NCIC	_____	_____
<input type="checkbox"/> Warrant file	_____	_____
<input type="checkbox"/> DOL firearms file	_____	_____
<input type="checkbox"/> DSHS	_____	_____
<input type="checkbox"/> Local check	_____	_____
<input type="checkbox"/> Fingerprints (original application only)	_____	_____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied    By _____		Date _____