



**BUREAU OF SECURITY AND INVESTIGATIVE SERVICES**  
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**REQUEST TO ASSOCIATE BSIS FIREARMS PERMIT WITH ADDITIONAL QUALIFYING LICENSE(S) AND REQUEST FOR REPLACEMENT FIREARMS PERMIT**

**Replacement Permit Fee: See Instructions for correct amount owed.**

This form may be used by a current holder of BSIS Firearms Permit to associate a currently-held BSIS qualifying license(s) to the Permit, and to request a replacement Permit that reflects the additional license(s).

**NOTE:** Read instructions carefully. An incomplete or incorrectly completed form will delay processing.

**COMPLETE FORM ELECTRONICALLY ON COMPUTER OR PRINT CLEARLY IF HANDWRITTEN.**

**PERMIT HOLDER INFORMATION**

Last Name	First Name	Middle Name	Fee Amount ( <b>SEE INSTRUCTIONS</b> ) \$
Firearms Permit Number	Firearms Permit Expiration Date		Date of Birth (MM/DD/YYYY)
Address of Record (Address, City, State & Zip Code) ( <b>SEE INSTRUCTIONS</b> )			
Residence Address (Address, City, State & Zip Code) ( <b>SEE INSTRUCTIONS</b> )			
<input type="checkbox"/> <b>Check box if requesting to update your address(es) with the Bureau (SEE INSTRUCTIONS)</b>			
Telephone (Optional) ( <b>SEE INSTRUCTIONS</b> )		Email Address (Optional) ( <b>SEE INSTRUCTIONS</b> )	

**FIREARMS PERMIT ASSOCIATION INFORMATION**

***Provide the number and expiration date for the license(s) you hold that you wish to have associated with your firearms permit. NOTE: You cannot associate a firearms permit with a Private Patrol Operator License organized as a corporation, or a Private Investigator or Alarm Company Operator License organized as a corporation or limited liability company. (See Permit Holder Information under Instructions).***

License Type	License No.	Exp. Date	License Type	License No.	Exp. Date
PI (Sole Owner/ Partners Only)			Security Guard <sup>2</sup>		
PI (QM) <sup>1</sup>			PPO (Sole Owner/ Partners Only)		
			PPO (QM) <sup>1</sup>		
			Alarm Agent		
			Alarm Company (Sole Owner/ Partners Only)		
			Alarm Company (QM)		

1) Provide the number and expiration date of the license on which you serve as the qualified manager.

2) Read Firearms Assessment Information in Instructions if requesting to associate firearms permit with a security guard registration.

**IMPORTANT INFORMATION - READ CAREFULLY:** I understand that a BSIS firearms permit authorizes me to carry an exposed (i.e. non-concealed) loaded firearm only of the caliber(s) listed on my permit card and only while performing the duties of the license associated with the permit. I also understand that a BSIS firearms permit does not authorize me to carry a concealed loaded firearm. Lastly, I understand that if I am a private patrol operator or alarm company operator licensee; a registered security guard or alarm agent, or a qualified manager for a private patrol operator or alarm company operator licensee, I can only wear or use an exposed firearm while on duty when in uniform.

**Mandatory Disclosure Language**

Submission of the requested information is required unless otherwise noted as optional. The Bureau of Security and Investigative Services (BSIS) of the Department of Consumer Affairs (Department) cannot process your Request to Associate BSIS Firearms Permit with Additional Qualifying License(s) and Request for Replacement Firearms Permit unless all requested information is provided.

Pursuant to the Information Practices Act, the BSIS is responsible for maintaining the information in this application. You have the right to review the records maintained on you by the BSIS or Department unless the records are exempt from disclosure by section 1798.40 of the Civil Code. Your completed application becomes the property of the BSIS and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies, as permitted by law.

Pursuant to the California Public Records Act (Gov. Code § 6250 et seq.) and the Information Practices Act (Civ. Code § 1798.61), information about persons possessing a license, certificate, permit or registration may be disclosed by the BSIS unless otherwise specifically exempt from disclosure under the law. The Address of Record of each licensee is not exempt from disclosure and will be released upon request by a member of the public. The BSIS makes every effort to protect the exempt personal information you provide us. Exempt information provided by you, however, may be disclosed in response to a court or administrative order, a subpoena, or a search warrant.

For questions about this notice or access to your record, you may contact the BSIS by mail at Bureau of Security and Investigative Services, Attn: Custodian of Record, P.O. Box 980550, Sacramento, CA 95798-0550; by phone at (800) 952-5210; or by e-mail at [bsis.prarequests@dca.ca.gov](mailto:bsis.prarequests@dca.ca.gov). For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210 or by e-mail at [dca@dca.ca.gov](mailto:dca@dca.ca.gov).

**I DECLARE UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT:**

- *I personally completed this form;*
- *To the best of my knowledge all statements on this form are true and accurate; and*
- *With full knowledge that all statements herein are subject to investigation and that any false, dishonest, or incomplete answer to any question on this form may be grounds for disciplinary action on any Bureau license, registration, permit, certificate or permit I hold, or may subject me to criminal prosecution.*

\_\_\_\_\_  
**Permit Holder Signature**

\_\_\_\_\_  
**Date**

**READ INSTRUCTIONS ON FOLLOWING PAGE THOROUGHLY**

## INSTRUCTIONS FOR COMPLETING THIS FORM

1. **Allow 60 days to process this form.** **DO NOT** contact the Bureau to check on the status on the processing of this form unless it is over 60 days from date of submission. You will be notified in writing if additional information is needed.
2. **Replacement Permit Fee:** If after the Bureau associates the new qualifying license, you wish to obtain a new Firearms Permit that reflects all current associations to the permit, you must submit the replacement permit fee. Due to a new law, the fee to request a replacement permit is changing. Read fee information below carefully to ensure you submit the correct fee amount.

### Replacement Permit Fees submitted in-person, online in BreZE, or postmarked:

- Before July 1, 2018: \$10
- On or after July 1, 2018: \$25

3. **Fee Payment:** A form received without payment of the full fee amount owed for a replacement permit (see Item 1) will result in Bureau staff associating your firearms permit to the requested qualifying license associations, but no issuance of a replacement firearms permit. Make check payable to Bureau of Security and Investigative Services or BSIS. Do not submit cash by mail. Fees are non-refundable.
4. **Date of Birth:** This personal identifier information assists in identifying permit holder in Bureau's database.
5. **Firearms Permit/Qualifying License Association Information:** A BSIS firearms permit authorizes the permit holder to carry an exposed firearm while performing the duties of only those license types listed on the firearms permit itself. For example, a permit holder who only has a security guard registration listed on his/her firearms permit and who also holds a private investigator (PI) license cannot work armed while carrying out the duties of a PI licensee. The firearms permit card must list the private investigator license for the permit holder to work as an armed PI licensee. **This form is to be used to associate a current, clear qualifying license that the requestor holds to the requestor's current, clear firearms permit.**
6. **Firearms Assessment:** Under certain circumstances beginning July 1, 2018, a holder of a BSIS firearms permit requesting to associate the permit with his/her BSIS security guard registration may be required to take and pass an assessment for the purposes of determining if he/she possesses, at the time of the assessment, appropriate judgement, restraint, and self-control to carry a firearm while on duty (Business and Professions Code Sections 7583.23 and 7583.47). **NOTE:** IF REQUIRED TO TAKE THE ASSESSMENT, BSIS WILL MAIL A LETTER ADVISING YOU TO SCHEDULE AN ASSESSMENT APPOINTMENT WITH INFORMATION ON THE SCHEDULING PROCESS. THE COST OF THE ASSESSMENT IS \$60.00 AND IS PAID DIRECTLY TO THE VENDOR ADMINISTERING THE ASSESSMENT. For more information about when the assessment is and is not required, visit BSIS' website: [www.bsis.ca.gov/firearmsassessment](http://www.bsis.ca.gov/firearmsassessment)
7. **Telephone and Email Address:** While optional, providing a phone number and an email address may expedite the Bureau's communication with you if additional information is required to process this request.
8. **Address Information:** The permit holder's residence address can be designated as the Address of Record or the Confidential Address.

**Address of Record (AOR):** This is the address that will appear on your permit and where the Bureau will mail your permit and any future correspondence relating to your Firearms Permit. The AOR is also the address that will be disclosed in response to public records requests and/or public sales requests. If providing a Post Office Box or an address other than your residence address as your AOR, provide your residence address.

**Residence Address:** If your AOR is not your residence address, provide your residence address. The residence address is confidential.

**NOTE:** Changing your AOR via this form only changes the AOR associated with this permit. If you hold other BSIS license types (individual and/or company) and want to change an address for them, you must submit a BSIS Address Change (Personal) Form for any other BSIS individual registrations, certificates or permits you hold and/or a BSIS Address Change (Company) Form for any company licenses you hold.