



Dickinson Police Department

Request for the Return of Firearm

This form must be completed and submitted to the Dickinson Police Department. This procedure must be completed prior to the release of a firearm. You will be contacted within 15 days of the date this form is received. **You must present a photo ID for the firearm to be returned.** If the firearm(s) was seized from another person, you must provide written proof of ownership, or written owner permission, to receive the firearm.

Last Name:	First Name:	Middle Name:
Current Address:		
Date of Birth:	Place of Birth:	
Driver's License Number:	Firearm Permit Number:	
Home/Cell Number:	Work/Cell Number:	

Case Number:			
Description of Firearm:			
Make:	Model:	Serial #:	
Caliber:	<input type="checkbox"/> Handgun	Barrel Length:	Shot Capacity: #
			<input type="checkbox"/> Rifle <input type="checkbox"/> Shotgun

By submitting this form, you hereby certify that the above information provided to the Dickinson Police Department is true, accurate and complete. You understand that the Dickinson Police Department relies on this information to make a determination as to your legal rights to possess a firearm.

For Dickinson Police Department Use Only

The owner, or other person entitled to possession is:

☐ Eligible ☐ Ineligible to receive and possess a firearm under the laws of this state.

If ineligible, list reason for ineligibility:

Releasing Officer's Name:	Badge #:	Date:
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