

COUNCIL ON LAW ENFORCEMENT EDUCATION AND TRAINING
RETIRED FIREARMS PERMIT – RENEWAL APPLICATION



2401 Egypt Road • Ada, Oklahoma 74820-0669
 Telephone: (405) 239-5100
www.cleet.ok.gov

APPLICANT FULL NAME: (L, F, MI)			
PERMIT NUMBER:		Last 4 of SSN:	CLEET #:
STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
PHONE NUMBER:		EMAIL ADDRESS:	
INFORMATION:			
<p>OAC 390:45-1-7.1: The card shall be valid for a period of ten (10) years from the date of issue. Upon expiration, or not more than 90 days prior to the listed expiration, the applicant may submit a renewal application to CLEET. In addition to the renewal application, and as provided in section 150.9 of Title 74 of the Oklahoma statutes, the applicant shall submit two fingerprint cards and a nonrefundable fee for a national criminal history record check by fingerprint analysis.</p> <p>The current non-refundable fee that must be included is \$41.00. The fee will need to be paid in the form of a money order or certified check, and paid to the order of CLEET.</p> <p>Upon completion of a criminal history check that is clear from preclusions listed in the Oklahoma Self-Defense Act (Title 21 O.S § 1290.10 or 1290.11), a new card shall be issued which shall be valid for a period of 10-years from the date of issue. If a preclusion is found no card shall be issued and the applicant will be notified in writing and given an explanation of the denial. Additionally, CLEET shall hold a hearing before taking any action to suspend or revoke the authority to carry a firearm pursuant to this rule.</p> <p>By signing below and submitting this form you are attesting to an understanding of the applicable statutes and rules from the Oklahoma Administrative Code. You are also attesting that you have not been convicted of or currently subject to any criminal prosecution prescribed in Title 21 1290.10 or 1290.11. Additionally, you attest that you were not forced into retirement due to a mental disorder, and have not suffered any injury or physical or mental impairment that would render you unsafe to carry a firearm.</p>			
_____ / _____ Applicant Signature Date:		_____ Applicant's Printed Name	
CLEET STAFF:	RECV'd	APPROV'd:	DENIED: