



TO: COURT OF PROBATE,

DISTRICT NO.

PETITIONER [Name, address, telephone number and social security number]

NAME AND ADDRESS OF CONSERVATOR AND OTHER INTERESTED PARTIES, IF ANY.

The petitioner represents that he or she has a federal firearms disability under 18 USC 922(d) (4) and 18 USC 922(g) (4) as a result of an **involuntary** adjudication or commitment rendered in Connecticut. Due to this disability, the petitioner lost the ability to purchase, possess or transport firearms or ammunition. The petitioner requests that these firearm privileges be restored pursuant to C.G.S. section 45a-100.

The petitioner further represents that:

\*\* By decree of the \_\_\_\_\_ Probate Court dated \_\_\_\_\_, he or she was committed to a hospital for psychiatric disabilities, but is no longer under an order of commitment.

\*\* By decree of the \_\_\_\_\_ Probate Court dated \_\_\_\_\_, he or she was placed under an order of conservatorship pursuant to C.G.S. section 45a- 650 or C.G.S. section 45a- 6540  
" \*\*\*\*\*The Probate Court terminated the order for conservatorship by decree dated \_\_\_\_\_.

\*\* The petitioner is not otherwise ineligible or legally barred from purchasing, possessing, or transporting firearms or ammunition under the laws of Connecticut or under the equivalent laws of any state or under federal law.

\*\* The petitioner has attached a complete list of court orders (including dates) pertaining to all orders of involuntary commitment or involuntary conservatorship.

As required by law, the following documents are also attached in support of this application:

1. Releases for all of the petitioner's records related to the application, including health, mental health, military, immigration, juvenile court, civil court, criminal court records and any other of the petitioner's records that may relate to the petition. These releases authorize the Commissioner of Public Safety to obtain any of these records for use at the Probate Court hearing or in any appeal from the Probate Court's decision
2. Certified copies of medical records detailing the petitioner's psychiatric history where applicable, including records pertaining to the specific adjudication or commitment that is the subject of this application
3. Certified copies of medical records from all of the petitioner's current treatment providers, if the petitioner is receiving treatment
4. A certified copy of all criminal history information maintained on file by the State Police Bureau of Identification and the Federal Bureau of Investigation pertaining to the petitioner or a copy of the response from said bureaus indicating that there is no criminal history information on file
5. Evidence of the petitioner's reputation, which may include notarized letters of reference from current and past employers, family members or personal friends, affidavits from the petitioner or other character evidence.

**All required information listed above must accompany the application at the time it is submitted to the court. Information provided after receipt of this application will not be considered unless specifically requested by the court.**

**The information specifically requested by the court must be certified copies of original documents and must be received by the court no later than 15 days after the date of the request. The court may extend this time period for good cause shown. Failure to provide the requested information within such time period may result in a denial of this application.**

WHEREFORE, the petitioner requests that the court approve this application.

**The representations made herein are made under the penalties of false statement.**

Date: .....  
Petitioner

I hereby certify that a copy of this application, release and all supporting documents submitted to the Probate Court as required by law were delivered to the Commissioner of Public Safety on the following date:

Date: .....  
Petitioner