



ARIZONA CCW LAW ENFORCEMENT REQUEST FOR PHOTO IDENTIFICATION

Pursuant to A.R.S. Sections 13-3102, 13-3112, and 38-1102, any person who has honorably served as a law enforcement officer in the United States for at least ten consecutive years shall be issued photographic identification from the Sheriff of the County in which they reside in lieu of the required Conceal Weapons permit issued by the Arizona Department of Public Safety.

Law enforcement officers who have honorably served for a minimum of ten consecutive years, at the federal, state, or local level, shall submit to the Sheriff the following:

1. A completed application from the Sheriff's Office. (ATTACHED)
2. An official document on letterhead from the agency of service or other certified documentation, to include the individual's name, grade/title, certifying dates of employment, service status, and point of contact within that agency who can verify the information.
3. A copy of current Arizona identification and/or driver's license.

Once all information is verified, you will be contacted to complete the process.

Please submit all documentation to:

**Office of the Sheriff
Yavapai County Sheriff's Office
255 East Gurley Street
Prescott, AZ 86301**

Please allow 4-5 weeks for processing.



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Please complete the following questions and attached all documentation to assist the Sheriff's Office with expediting your request for photo identification.

LEGAL NAME (Last) _____ (First) _____ (M.I.) _____	
ALIAS NAMES (Last) _____ (First) _____ (M.I.) _____	
RESIDENCE ADDRESS (Street number and name including Apartment / Lot) _____	CITY _____ STATE _____ ZIP CODE _____
WHAT YEAR DID YOU ESTABLISH RESIDENCE IN YAVAPAI COUNTY?	YEAR _____
HOW LONG HAVE YOU RESIDED AT YOUR CURRENT RESIDENCE?	YEARS _____ MONTHS _____
MAILING ADDRESS (If different from above) _____	CITY _____ STATE _____ ZIP CODE _____
CONTACT PHONE NUMBER (Include Area Code) _____	BIRTH DATE (MONTH / DATE / YEAR) _____
ARIZONA DRIVER'S LICENSE NUMBER _____	GENDER _____ FEMALE _____ MALE _____
AGENCY / DEPARTMENT RETIRED FROM _____	STATE _____
PHONE NUMBER (include Area Code) _____	DATES OF SERVICE AS LAW ENFORCEMENT OFFICER _____
<p>INDIVIDUALS APPLYING MUST MEET THE FOLLOWING CONDITIONS:</p> <ol style="list-style-type: none"> 1. YOU ARE A RESIDENT OF YAVAPAI COUNTY AND A UNITED STATES CITIZEN. 2. YOU ARE NOT UNDER INDICTMENT FOR AND HAVE NOT BEEN CONVICTED IN ANY JURISDICTION OF A FELONY UNLESS THAT CONVICTION HAS BEEN EXPUNGED, SET ASIDE OR VACATED AND YOUR RIGHTS HAVE BEEN RESTORED. 3. YOU ARE NOT A PROHIBITED POSSESSOR UNDER STATE OF FEDERAL LAW. 4. YOU SERVED A MINIMUM OF TEN (10) YEARS AS FULL-TIME CERTIFIED LAW ENFORCEMENT OFFICER. 5. YOU DO NOT SUFFER FROM MENTAL ILLNESS & HAVE NOT BEEN ADJUDICATED MENTALLY INCOMPETENT OR COMMITTED TO A MENTAL INSTITUTION. <p>PLEASE REVIEW ARS 13-3102, 13-3112, AND 38-1102 TO BE FULLY AWARE OF YOUR RESPONSIBILITIES AND THE EXPECTATIONS FOR THE RIGHT TO POSSESS THIS IDENTIFICATION.</p>	
YOUR SIGNATURE _____	DATE _____

FOR YCSO USE ONLY	Date of Verification: _____	Initials: _____
Date of Issuance: _____	Initials: _____	Date of Approval: _____
APPROVED: <input type="checkbox"/>	DENIED: <input type="checkbox"/>	Sheriff's Signature _____