



Jefferson County Sheriff's Office

753 Waterman Drive
Watertown, New York 13601



Colleen M. O'Neill
Sheriff

Brian R. McDermott
Undersheriff

Character Reference Questionnaire

To be completed by the Character Reference for the Pistol Permit Applicant.

Character Reference - Complete each question truthfully to the best of your knowledge. Sign/Notarize the form after completing and return to the Applicant promptly. You may be contacted by the Pistol Permit Investigator for further discussion and/or verification of information.

| | | | | |
|----------------------------|------|-----------------------|---------------------------------|------------------|
| Reference's First Name | M.I. | Reference's Last Name | Date of Birth ____/____/____ | Day Time Phone # |
| Street Address (No PO Box) | | City/Town | State | Zip Code |

Applicant's Name: _____

It is my opinion the applicant named above is a person of good moral character, not convicted of a crime or "serious offense," not had a pistol permit revoked, not disqualified by reason of mental illness, not disqualified pursuant to an order of protection and is a person whom no good cause exists for the denial of the permit. I affirm that the applicant has a demeanor and temperament to safely and responsibly possess and carry a pistol. I understand law enforcement and court personnel are relying on my vouching for the Applicant. I understand it is a crime to knowingly make a false claim punishable by one year in jail or a \$1,000.00 fine pursuant to Penal Law §175.25. I further understand that false statements made may impact my present or future rights to possess a pistol in New York State.

- How long have you known the Applicant? _____ In what capacity do you know the Applicant? _____
- What family/social/work activities have you participated in with the Applicant? _____
- What specific knowledge/skills/education/accomplishments/achievements are you familiar with of the Applicant? _____
- What is the attitude of the Applicant in family/social/work environments? _____
- Does the applicant use/consume drugs and/or alcohol? _____ If yes, how much? _____
- Has the applicant ever threatened or acted in a way to harm or kill themselves or someone else? _____
- List any first or second hand accounts of unlawful, reckless, or dangerous conduct which you are aware of involving the Applicant: _____

Sworn to and subscribed before me this
_____ day of _____, 20____

Reference Signature

Notary Public
My Commission expires: _____, 20____

Administration: (315) 786-2660
Civil Office: (315) 786-2714
Law Enforcement: (315) 786-2671



Records Office: (315) 786-2710
Corrections: (315) 786-2688
Pistol Permits: (315) 786-2711