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| --- | --- |
| **Court:** [ ]  District [ ]  JuvenileColorado County: Court Address:  | *Court Use Only* |
| **Parties:**Petitioner: The People of the State of ColoradoIn the Interest of: &Respondents:  |
| **Filed by:**Name: Address: Phone  Fax: Email:  Bar Number: (For lawyers) | CaseNumber: Division: Courtroom:  |
| **Motion to Have a Firearm** |

I request a determination that the C.R.S. § 18-12-108(3)(a) prohibition against firearms does not apply to me.

**1. My Contact Info**

[ ]  Please update my contact information to that in the “Filed by:” section above.

[ ]  Please update my contact information to:

Full Mailing Address:

Phone:  Email:

**2. Grounds**

I make this request pursuant to C.R.S. § 18-12-108(3)(b).

**3. Qualifications**

a) I have completed my sentence.

b) I have good cause for possessing, using, or carrying a firearm because:

**4. Certificate of Service**

I certify that on *(enter date)* , I gave a copy of this document to the prosecuting attorney by: *(select at least one)*

[ ]  Hand Delivery [ ]  Colorado Courts E-Filing *(lawyers only)*

[ ]  Email or Fax to:

[ ]  Regular Mail, addressed to: *(name, full mailing address)*

**5. Verified Signature**

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the  day of , , at

*(date) (month) (year)*

, .

*(city or other location, and state or country)*

Print Your Name:

Your Signature:

Lawyer Signature:

*(If any)*