|  |  |
| --- | --- |
| **Court:**  District  Juvenile  Colorado County:  Court Address: | *Court Use Only* |
| **Parties:**  Petitioner: The People of the State of Colorado  In the Interest of:  &  Respondents: |
| **Filed by:**  Name:  Address:  Phone  Fax:  Email:  Bar Number:  (For lawyers) | Case  Number:  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)*