# Washington State Patrol Firearms Background Division Firearm Transfer Denial Notification and Appeal Process

Denied Person Information	FFL Information
Full Name:	Business Name:
Date of birth:	Phone number:
NTN:	SAFE TX Number:

Additional information is available at www.wsp.wa.gov/firearms-background-division/, but some potential reasons for a denial are listed below:

### This determination was made due to a background check conducted by the Washington State Patrol

#### Title 18, United States Code (U.S.C.) Section 922 (g) and (n) of the Gun Control Act

Federal Firearm prohibitions apply to any person who:

- (g)(1) Has been convicted of a crime punishable by imprisonment for a term exceeding one year (or a misdemeanor crime punishable by imprisonment over two years)
- (g)(2) Is a fugitive from justice
- (g)(3) Is an unlawful user of or addicted to any controlled substance
- (g)(4) Has been adjudicated as a mental defective or committed to a mental institution
- (g)(5) Is an alien or is illegally or unlawfully in the United States
- (g)(6) Has been discharged from the armed forces under dishonorable conditions
- (g)(7) Has renounced their United States citizenship
- . (g)(8) Is subject to a qualifying protection/restraining order
- (g)(9) Has been convicted in any court of a misdemeanor crime of domestic violence
- (n) Is under indictment/information for a crime punishable by imprisonment for a term exceeding one year

#### Washington State Domestic Violence Prohibition RCW 9.41.040(2)(a)(i), (ii), (iii)

All convictions for crimes listed below that meet the family or household member, or intimate partner relationship as defined in 26.50.010:

#### (i) Committed on or after July 1, 1993:

- Assault in the fourth degree
- Coercion
- Stalking
- Reckless endangerment
- Criminal trespass in the first degree
- Violation of protection order provisions or no-contact order restraining the person or excluding the person from the residence based on RCW 10.99.040 or RCW 26.50.060, 070, and 130

#### (ii) Committed on or after June 7, 2018:

Harassment

#### (iii) Committed on or after July 1, 2022:

Violation of the provisions of a protection order under RCW 7.105

Because you have been denied a firearm purchase or transfer, RCW 9.41.114 requires your name to be entered into the state Denied Firearm Applicant (DFA) database for six years. RCW 43.43.823 explains your right to appeal that denial. If you choose to appeal, your name will be removed from the file for one year during the denial review process. If your appeal is successful, your name will be permanently removed from the file <u>for that denial</u>. If your denial is upheld, your name will be entered back into the file for the remainder of the six years.

RCW 43.43.823 requires the WSP to report the following information to the the local law enforcement agency in the jurisdiction where the attempted purchase or transfer took place and the Washington Association of Sheriffs and Police Chiefs (WASPC) for grant purposes:

- Identifying information of the applicant
- The basis of the denial

- Date of application and the denial of the application
- Other information as determined by the WSP

To begin your appeal, follow the instructions on the document below. If you do not exercise your right to appeal, you may be subject to a criminal investigation by the WSP and/or a local LEA.

Firearms Background
Division (FBD)
PO Box 42649
Olympia WA 98504-2634
360-704-7840
Firearmappeal@wsp.wa.gov



## WSP Firearms Background Check Appeal Identity Verification Form

If you have been denied a firearm transfer due to your background check and you wish to appeal, please complete this form. In order for us to consider your appeal you must have this completed form, documentation you wish for us to consider, and a clear and legible color copy of your government issued identification (driver license, ID card, etc.) notarized.

Email your notarized packet to: firearmappeal@wsp.wa.gov Please provide the following required information: Full Name: Date of Birth: NTN: \_\_\_\_ Mailing Address: \_\_\_\_\_ Identification Type: Identification Number: \_\_\_\_\_ Provide the following optional information if you wish to be contacted via either method: Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_ Preferred method of communication (if you do not indicate a preference, all communication will be done via United States Postal Service (USPS) mail): Phone Email **USPS Mail** Signature of Appellant:\_\_\_\_\_\_ Below for Notary Use Only State of Washington County of \_\_\_\_\_ I certify that I know or have satisfactory evidence that the person named above is the person who appeared before me and provided the indicated identification type and number, and said person acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument. Dated: \_\_\_\_\_ (Seal or stamp) Signature Title My appointment expires: \_\_\_\_\_