

MARYLAND STATE POLICE

WEAR AND CARRY PORTAL

USERS GUIDE

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THE LICENSING PORTAL – WEAR AND CARRY (HANDGUN) PERMIT

PURPOSE

The purpose of this section of the User's Guide is to provide an overview of the Handgun Permit sections of the Licensing Portal to the residents of Maryland who may be considering applying for a Maryland handgun permit.

AUTHORITY

The **Maryland Code Annotated**, Public Safety Article §5–301, *et seq.* grants the Secretary of Maryland State Police the statutory authority to investigate and, if all criteria are satisfied, issue a Maryland wear and carry permit to an individual applying for said permit.

Public Safety Article §5–301 can be viewed by clicking the following link: http://mgaleg.maryland.gov/webmga/frmStatutesText.aspx?article=gps§ion=5-301&ext=html&session=2020RS



ACCOUNT CREATION AND MANAGEMENT

INTRODUCTION

Before you can submit an application, you will need to create an account. Creating your account assists us with verifying your identity and ensures the safety of your personal demographics. Below are step by step instructions for creating your user account.

Note: If you already have a Licensing Portal account associated with a regulated firearm portal account, you do not need to create a new account to apply for a wear and carry permit. Use your current login user name/email and password to login to your account. Account creation only needs to be performed once.

USER ACCOUNT

From the homepage of the Licensing Portal website (<u>https://licensingportal.mdsp.maryland.gov</u>), click **"Create My** Account":





After clicking **"Create My Account"**, you will reach the Account Registration screen. This screen will allow you to enter all of your demographic information. Once you have entered all of your information, click **"REGISTER"** to complete the registration process:

	s to create an account.		
Required fields marked with an asterisk i	19.		
First Name *	Middle Name	Last Name *	Suffix
First Name is required			
Email *		Confirm Email *	
Password *		Password Requirements Minimum 8 Characters. Contains both letters and numbers. Contains at least one upper case letter.	
Confirm Password *		Is not all numbers, all special characters, or all alphabetic chara Does not contain leading or trailing blanks.	cters.
	Gender • Social Security Numb	er Driver's License State* •	Driver's License
Date of Birth *			
Date of Birth *			

After you click **"REGISTER"**, the Registration Complete page will display and direct you to check your email for the Account Activation email:





Upon receiving the Account Activation email, click the "Activate My Account" link:

Account Activation	
admin@MSPBridge.gov Today at 9:35 Al To Verification	∦ ★
Hello Katrice, Welcome to the Maryland State Police Licensing Portal. Your new account has been created in our system, but requires activation before it can be used. To activate your account, please click on the link provided below: <u>Activate My Account</u> If you believe you have received this email in error, please contact the Maryland State Police Licensing Division at [emailaddress@maryland.gov] or at 410.653.#### as soon as possible. Thank you, The Maryland State Police	

Once you click on the "Activate My Account" link, your Licensing Portal account will be verified and ready to use:

Maryland State Police Licensin	g Portal	Manyland.gov Phone Directory State Agencies Online Services
	Account Activated	
	Congratulations: your new account has been activated! Please click the Log In button, below, to access your personal Account Page.	
	RETURN HOME	



CHANGING YOUR USERID OR PASSWORD

To change your password, you will first need to login to your portal account:

SYNEF POIL		Maryland.gov Phone Directory State Agencies Online Services
Maryland State Police Licensir	ng Portal	4 НОМЕ
	Account Log In	
	User Name/Email katrice.howard@maryland.gov	
	Password	
	LOG IN	
	No account yet? <u>Click here to register!</u>	
	FORGOT PASSWORD?	
	RETURN HOME	
Contact Us Terms Of Use Privacy Disclaimer 1201 Reisterstown Road, Pikesville, MD 21208 (410) 653.4200 (800) 525.5555 (410) 486.0677 (TDD)		f 🛛 🖾 🧮

Once you've logged in, select the "Account" tab located to the right of the "Messages" tab:

Maryland State Police Licensing	: Portal			Mandager Dana Dentro Tata Avendos Otilos Son
Welcome, DONALD! Use the dashboard below to start or continue an a	application, get status updates and other message	es, manage your existing ap	plications, or update your account settings and information.	
STAP	RT NEW 77R APPLICATION		RESUME HGP APPLICATION	START NEW HGP APPLICATION
Application for P	urchase of Regulated Firearms	i	Application for	Handgun Permit
The 77R is the Maryland State Polic	e Application and Affidavit to Purchase a Regulat	ed Firearm.	are not limited to: business owners and employees, correc	tantial reason to wear and carry a firearm. Examples include, bu- tional officers, former police officers, and individuals requiring a ersonal protection.
TTR APPLICATIONS HGP APPLICATIONS 3	MESSAGES (1) ACCOUNT			
Application #	Date Forwarded *	Status	Expiration	
2019000016	09/27/2019	UNDER REVIEW MDSP	*	



From the **"Account"** tab you will be able to change any of your account information or personal demographics. (ie. password, user name, driver's license #, phone number, name etc.):

				<u> </u>
	START NEW	W 77R APPLICATION	l.	RESUME HGP APPLICATION START NEW HGP APPLICATION
A	pplication for Purch	ase of Regulated	d Firearms	Application for Handgun Permit
The 77R is the	e Maryland State Police Appli	ication and Affidavit to Pur	rchase a Regulated Firearm.	Issued to an individual who demonstrates a good and substantial reason to wear and carry a firearm. Examples include, but are not limited to: business owners and employees, correctional officers, former police officers, and individuals requiring a firearm for personal protection.
7R APPLICATIONS H	GP APPLICATIONS	ESSAGES ACCOUNT		
DONALD PICKLE				
CHANGE USER ID / EMAIL		Last Name * PICKLE	su#rx JR ♥	
CHANGE USER ID / EMAIL First Name 5 DONALD Social Security Number	L CHANGE PASSWORD			
User ID: dpicklejr@gmail CHANGE USER ID / EMAIL First Name * DONALD Social Security Number •••••888 Driver's License State* Maryland	L CHANGE PASSWORD Middle Name RAY Date of Birch * 01/01/1919	PICKLE		

To change your password simply click on the "Change Password" button:

CHANGE First Name DONALD	fpicklejr@gmail.co E USER ID / EMAIL	CHANGE PASSWORD Middle Name RAY I have no middle name	Less Name * PICKLE	suffix JR
First Name * DONALD Social Secur		Middle Name RAY		
DONALD Sociel Secur		RAY		
Social Secur	D		PICKLE	IR T
		1 have no middle name		110
···888	rity Number	Date of Birth **	Gender	
	88	01/01/1919	MALE	
		MM/DD/YYYY		
Driver's Lice	ense State*	Driver's License # *		
Maryland	d	 P123456789123 		
-				
Home				
(410) 653	0.4540			Work Phone



A pop-up window will appear to guide you through changing your password. You will be prompted to enter your Current Password, enter a New Password (be sure to adhere to the Password Requirements) and then Confirm the New Password. Once you've entered the requested items, click **"Submit":**

Katrice Howard User ID: lady_bear2002@ya	ahoo.com	Change Password Please enter a new password for your account.	
CHANGE USER ID / EMAIL	CHANGE PASSWOR	Current Password	
First Name* Katrice	Middle Name	New Password	
Social Security Number	Date of Birth 10/23/1980	Confirm New Password	
License State:* Driver's Licens Maryland V h64010293	Contraction of the Contraction o	Password Requirements	
Home Phone (493) 739 - 5583		Minimum 8 Characters. Contains both letters and numbers.	ne 4 - 8950
		La not all numbers all spacial sharestors are all almostatic CANCEL SUBMIT	



FORGOTTEN PASSWORD

If you forget your password, you will need to reset it from the Portal login screen. Go to the Licensing Portal HOME page (<u>https://licensingportal.mdsp.maryland.gov</u>) and click the "LOG IN". On the lower part of the login screen, below the login fields, click **"FORGOT PASSWORD?"**:

Maryland State Police Licensin	ig Portal	<u>Maryland gov</u> Phone	t Directory State Agencies Online Services
	Account Log In		
	User Name/Email katrice.howard@maryland.gov		
	Password		
	LOG IN		
	No account yet? <u>Click here to register!</u>		
	FORGOT PASSWORD?		
	RETURN HOME		

You will now be prompted to enter your email address associated with your Portal account. Remember, the email address entered here must be the one your entered upon account creation:

Forgot Password
Please enter the email address associated with your account below. An email will be sent with a link to reset your password. ^{Email} katrice.howard@maryland.gov
SUBMIT ВАСК



When you submit the password change request, an email will be sent to the email address associated with your Portal account.



Check your email for the Account Request email. From the reset email message, click on the **Confirm Password Change** link.





The link will bring you to the Reset Pasword page where you can now enter a new password. You will be asked for your userID/email address again, and then to enter your new password twice. Once all fields are filled, and meet the requirements given in the Reset Password box, click "**SUBMIT**":

	Reset Passwo	ord	
Please enter a new pa Password Requirem Minimum 8 Charac Contains both lette Contains at least or	ents ters. rs and numbers.		
User Name/Email	New Password	Confirm New Password	
	SUBMIT		
	RETURN HOME		

CHANGING YOUR EMAIL ADDRESS

You may choose to update or change the email address associated with your account on the Licensing Portal.

Click "CHANGE USER ID/EMAIL" on the ACCOUNT tab:

DONALD PICKLE (ser ID: dpicklejr@gmail.co	m						
CHANGE USER ID / EMAIL	CHANGE PASSWORD						
First Name *	Middle Name	Last Name *	Suffix				
DONALD	RAY	PICKLE	JR	•			
	l have no middle name						
locial Security Number	Date of Birth 1	Gender					
	01/01/1919	MALE -					
	MM/DD/YYYY						
Driver's License State*	Driver's License # *						
Maryland	 P123456789123 						
and Junio	1 123430703123						
Home Phone							
(410) 653 - 4512			Work Phone		Mobil	ile Phone	



The below pop-up will display prompting you to enter and confirm your new email address:

Change User ID / Ema Please enter a new Email f Current Email: dpicklejr@g New Email *	or your account. This will also	change the email you	enter to login.
	Confirm New Email *		
		× CANCEL	SUBMIT

Please note that a change to the email address will require your authentication at both the new email address and at the old that the change you are attempting is legitimate.

Any applications submitted under the old userID/email address will be automatically associated with the new email address after authentication has been completed.



ACCOUNT LOG IN

From the **Account Activated** page (previous page) or from the Licensing Portal Home Page (below), click "**LOG IN**" to go to the **Account Log In** page:



On the **Account Log In** page, enter your User Name/Email (the email address you used to register), and the Password you used to create the account. Click **"LOG IN"**:

Maryland State Police Licensing Portal		Merdend ann Ehnes Dimotory State Alementes Dahin Benkers
	Account Log In	
	User NamelEmal*	
	LOG IN	
	No account yet? Click here to register!	
	FORGOT PASSWORD?	
	RETURN HOME	



USER DASHBOARD

After successfully logging into the Licensing Portal, the first screen you will see is the User Dashboard (below). Applicants can start or resume 77R applications or Handgun Permit applications by selecting one of the large blue buttons in the center of the screen.

Below the start new/resume application buttons, there are four additional tabs available – "77R APPLICATIONS", "HGP APPLICATIONS", "MESSAGES" and "ACCOUNT". You can tell which tab you're currently viewing by noting which label is underlined. A numerical digit displayed to the right of a tab indicates that there are applications that need attention or that there are messages for you to review. In the below example, the 77R APPLICATIONS tab is being viewed, additionally there are three HGP applications that need attention and one message that needs to be reviewed:





77R APPLICATIONS TAB

The **Application** # column provides the unique application number assigned to a 77R application when it is saved for the first time by a user.

The **Date Forwarded** column displays the date that the 77R application was received by the Licensing Division and therefore marks day one of the statutorily mandated seven-day waiting period.

The **Status** column provides the current status of the specific application as it moves through the submission, review and disposition process.

The **Expiration** column provides the date upon which a specific application will either be deleted from the system or set with an application status of Expired.

The buttons to the right of the columns display addition options for the specific application throughout the application process:

77R APPLICATIONS HGP APPLICATIONS 3	MESSAGES (1) ACCOUNT			
Application #	Date Forwarded 🕶	Status	Expiration	
2019000016	09/27/2019	UNDER REVIEW MDSP	-	PRINT APPLICATION



HGP APPLICATIONS TAB

The **Application #** column provides the unique application number assigned to a handgun permit application after it has been started by the applicant.

The **Status** column provides the current status of the specific application as it moves through the application process.

The **Accepted Date** column provides the date upon which a specific application has been accepted by the Licensing Division. A handgun permit application will not be accepted unless all required for submission documentation has been received and reviewed for accuracy and applicable application fees have been received.

The buttons to the right of the columns display additional options for the specific application throughout the application process.

In the below example, applications 19HGP000303 and 19HGP000305 are both in an UNSUBMITTED status. Both of these applications have been started, however, neither of them have been completed by the applicant and have yet to be submitted to the Licensing Division. Applicant 19HGP000279 is in an APPLICATION SHORTAGE status. This application was submitted to the Licensing Division, however, upon review of the application, it was discovered that one or more items required for submission were missing or incorrect:

77R APPLICATIONS HGP APPLICATIONS 3	MESSAGES (1) ACCOUNT		
Application #	Status	Accepted Date	
	UNSUBMITTED		R RESUME APPLICATION
19HGP000305 UNS	DIVEORMITED	1 2	B DELETE APPLICATION
			CORRECT SHORTAGES
19HGP000279	APPLICATION SHORTAGE	-	PRINT APPLICATION
19HGP000303	UNSUBMITTED	Ħ)	RESUME APPLICATION
			DELETE APPLICATION



MESSAGES TAB

When an application changes status, the applicant will receive an email confirmation of that status change sent at the email address used to register/create an account with the Licensing Portal system. The applicant will also receive a copy of that confirmation email online, under the **MESSAGES** tab. The below example shows three messages for this user. To the right of the **APPLICATION HAS SHORTAGES** message for HGP Application 19HGP000279, you will see a **VIEW EMAIL CONTENT** link. Clicking this link will display the email message that was sent to the applicant.

77R APPLICATIONS HGP APPLICATIONS 2 MESSAGES ACCOUNT	
	Search All Messages
77R: Application 2019000016 Status Update 09/27/2019 01:59 PM APPLICATION HAS BEEN SUBMITTED TO LICENSING DIVISION.	
HGP: Application 19HGP000279 Status Update 09/20/2019 01:03 PM APPLICATION HAS SHORTAGES.	VIEW EMAIL CONTENT
HGP: Application 19HGP000279 Status Update 09/19/2019 11:58 AM APPLICATION HAS BEEN SUBMITTED FOR REVIEW - PENDING.	

Sent email content from the above example. Click "OK" to return to MESSAGES:

	Sent Email Content	
	Dear DONALD,	
	Regarding Handgun Permit application number 19HGP000279.	
The 77R	Your HGP application has been reviewed and placed into "Hold" status due to missing or incorrect documentation.	Examples include, build individuals requiring a
	Please attach the following documentation to your application in the Licensing Portal:	indentional regarding o
77R APPLICATIONS	Application Information The application has not been paid in full. Reference 2	
77R: Application 2/ 09/27/2019 01:59 PM APPLICATION HAS BE	Domestic Relationship Information Domestic Relationship: Need more Information	
HGP: Application T 09/20/2019 01:03 PM APPLICATION HAS SH	If you have any 'Required for Submission' documents as shortages, you have 72 hours to address them. Once you have successfully attached this documentation and resubmitted the application, it will be reviewed and verified by the Handgun Permit Section. If sufficient, you will then receive an email stating your application status has changed to 'Application Accepted."	NEW EMAIL CONTENT
HGP: Application 1 09/19/2019 11:58 AM APPLICATION HAS BE	If you believe you have received this email in error, please contact the Maryland State Police Licensing Division at msp.handgunpermits@maryland.gov or at 410.653.4500 as	-



ACCOUNT TAB

- -----HGP APPLICATIONS 2 MESSAGES ACCOUNT DONALD PICKLE user iD: dpicklejr@gmail.com CHANGE USER ID / EMAIL CHANGE PASSWORD Middle Name Suffix Last Name * PICKLE DONALD RAY JR I have no middle name Date of Birth Social Security Number Gender 01/01/1919 MALE . MM/DD/YYYY Driver's License State* P123456789123 Maryland (410) 653 - 4512 Work Phone Mobile Phone

A user may update or change their account information by accessing the **ACCOUNT** tab.

Typically, accounts will be updated or changed for things like marriage or divorce, or for a phone number change.

You may choose to update or change the email address associated with your account on the Licensing Portal. Please note that a change to the email address will require your authentication at both the new email address and at the old email address that the change you are attempting is legitimate. Any applications submitted under the old userID/email address will be automatically associated with the new email address after authentication has been completed.

Instructions for changing your password and/or email address are given earlier in this document.



STARTING A NEW HANDGUN PERMIT APPLICATION

To start a new handgun permit application, from the user dashboard, click "START NEW HGP APPLICATION":

		2	
	START NEW 77R APPLICATION	RESUME HGP APPLICATION	START NEW HGP APPLICATION
	on for Purchase of Regulated Firearms I State Police Application and Affidavit to Purchase a Regulated Firearm.	Issued to an individual who demonstrates a good and subst-	Handgun Permit antial reason to wear and carry a firearm. Examples include, bu ional officers, former police officers, and individuals requiring a
77R APPLICATIONS	TIONS 😰 MESSAGES ACCOUNT		sinar once a contra point once once a non-individual requiring a
Application #	Status	Accepted Date	
19HGP000279	SUBMITTED (PENDING PAYMENT)	-	

APPLICANT INFORMATION SECTION

When applying for your first handgun permit in the Licensing Portal, you will be required to enter all of your demographic information on the **Applicant Information** page of the application. For any applications submitted after your initial one, your demographic information will be prepopulated. Please be sure to review this information and make any relevant changes that may have occurred since your previous application:

EXCEDE:						MardenLaw ProveDenders State	e Agencies Online Ser
Maryland State Police Licensing	; Portal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	🕒 LOG OUT
Applicant Information	Application Information Que	stionnaire Employment	Domestic Relationship	References	Documents	Summary	Signature
• This account should be used by one person or	nly. Do not share your login informati	ion with anyone.					
Basic Information							
Applicant Information	First Name * DONALD		Middle Name *		Suttor * JR		
			I have no middle name		1.		
Current Residential Address Steet Address # 0 for and not be accorded " 1111 REISTERSTOWN RD			Town/City* PIKESVILLE				
State * Maryland		ung " altimore County		Zip Code * • 21208			
Harme Phone " (410) 653 - 4512	Work Phone		Mobile Phone		Fax		



The **Livescan PCN #** will be located on the receipt that you received from your Livescan Fingerprint vendor. Once all required fields have been completed, click **"NEXT**" to move on to the **Application Information** section:

Livescan PCN # 123456789	Are you a Maryland Qualified Handgun Instructor? *
Are you a United States Citizen? *	
• Yes	
🔲 I am a naturalized Citizen. (NOTE: If Naturalized, attach a copy o	of your Naturalization paper.)
O No (YOU MUST attach a copy of your Employment Authorization Car	rd with this application.)
с	ANCEL NEXT

APPLICATION INFORMATION SECTION

In the **Application Information** section, the applicant will be required to select their handgun permit category or categories, any fee exemption qualifications and the type of application that they are submitting.

Handgun Permit Category: Select the permit category that best fits your request. Please note that multiple permit types may be selected, however, documentation to support each permit category will be required to complete the background investigation.

Fee Exemption: Select one of the two fee exemption boxes only if you qualify. Selecting a fee exemption when you do not qualify will cause your application to be delayed until the appropriate fee has been received. As per Maryland Public Safety Article 5-304 (d)(1)(2), a Maryland State, county, or municipal public safety employee who is required to carry, wear, or transport a handgun as a condition of governmental employment; OR a retired law enforcement officer of the State of Maryland or a county or municipal corporation of the State of Maryland is exempt from the application fee for a Maryland Handgun Permit.

Application Types: Select only one application type.

Original: The initial filing for a wear and carry permit from an individual. An original permit expires on the last day of the holder's birth month, following two years after the date the permit is issued.

Renewal: the filing for re-issue of an existing wear and carry permit that has not expired. A renewed permit expires on the last day of the holder's birth month, following three years after the date the permit is issued.

Subsequent: the filing for a different wear and carry permit type, in addition to an already existing wear and carry permit. A subsequent permit expires on the last day of the holder's birth month, following two years after the date the permit is issued.



Replacement: a request made by a wear and carry permit holder to replace an existing wear and carry permit, due to loss or theft, in accordance with the Annotated Code of Maryland 29.03.02.10 and 29.03.02.11. The replacement permit will be issued with the same expiration date as the permit being replaced.

Modification: the filing for change or alteration of an already existing wear and carry permit in accordance with Annotated Code of Maryland 29.03.02.11. A modified permit is issued with the same expiration date as the previously issued permit.

Once all applicable and required fields have been completed, click "NEXT" to move on to the Questionnaire section:

ENTEROUSE							Maryland.anu Phone Directory State	Agencies Online Service
Maryland State Poli	ce Licensing Portal					SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	😝 LOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Handgun Permit Category								
Please select the Category(les) me	ost applicable to your current application							
Owner or Employee of	a Business - Submit photocopies of a Trai	der's License, Business License,	or other legal document	to prove the existence of the bus	iness or organization.			
Assumed Risk Positions	- Correctional Officers, Judges, State's Attorn	ey, Assistant State's Attorney, a	nd Elected Officials.					
Active or Former Law E	nforcement - Law Enforcement (Active, R	etired. or Resigned in good stan	iding from a recognized l	aw enforcement agency)				
	rity Guard / Special or Railroad f structor on an MSP form. A copy of the form I							
Personal Protection / C	ategory Not Listed Above - There m	ust be documented evidence of	f recent threats, robbene	s, and/or assaults, supported by	official police reports o	r notarized statements from with	esses.	
Documentation may not be red	acted, with the exception of personal	identifiers of customers o	r other third parties.	Additional documentation	may be required to	complete your investigatio	n.	
Fee Exemption	286 622		221					
You may be exempt from the app	lication fee if you are:							
A Maryland State, county or n	nunicipal public safety employee who is r	equired to carry, wear, or tr	ansport a handgun as	a condition of governmental	employment; or			
A retired law enforcement of	icer of the State of Maryland or a county	or municipal corporation of	the State of Maryland	5				
As specified under Maryland Public S of Maryland or a county or municipal	afety Article 5-304 (d)(1)(2), a Maryland State. corporation of the State of Maryland.	county, or municipal public safe	ty employee who is requ	ired to carry, wear. or transport a	handgun as a conditio	n of governmental employment:	OR a retired law enforcement offici	er of the State
Application Type								
Please select one.								
O Original (\$75.00) O Ren	ewal (\$50.00) O Subsequent (\$50.00)	O Replacement (\$10.00)	O Modification (\$1	0.00)				
			BACK	NEXT				
			All required fields ha	we not been filled out.				
Contact Us Terms Of Use Privacy Disclaime 1201 Reisterstown Road, Pikesville, MD 21208 /4106 652 42001 1980 055 5555 1 4410 496 06						Fi 🖸 🗟 🖩	I	



QUESTIONNAIRE SECTION

Complete all three pages of the **Questionnaire** section honestly and truthfully. Any "**Yes**" answers will open additional space for a detailed explanation (see question 2 below). Question 15 (reason for a handgun permit) requires a specific answer explaining why the applicant feels they need a handgun permit. Question 15 establishes the applicant's statutorily mandated "good and substantial" reason for requesting a handgun permit. Once all three pages of the **Questionnaire** section and any required explanations have been completed, click "**NEXT**" to move on to the **Employment** section:

10.00							Maryland.anv Phone Directory State	Agenties Online Service
Maryland Si	tate Police Licensing Porta	Ľ.			1	SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	ፁ LOG OUT
oplicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
plicant Questi	onnaire							
	0		6				0	
	Step 1		518				Step 3	
1. Have you ever b O Yes 💿 No	een served with an ex-parte or pr een ARRESTED for a violation of a	bers 1 - 14 below to this application. rotection order for domestic violence? iny criminal law?						
Provide detailed expla	ination		0/2500					
3. Have you ever be	een CHARGED for a violation of a	ny criminal law?						
🔿 Yes 💿 No								
🔿 Yes 🔘 No	een CONVICTED for a violation of	any criminal law?						
🔿 Yes 🔘 No	een CONVICTED for a violation of	any criminal law?						
 Yes No Have you ever biology Yes No 	een CONVICTED for a violation of							



icant Questionna	ire							
can questionna	0						0	
	Step 1		Step	2			Step 3	
		ovide a detailed explanation for all "Ye bers 1 - 14 below to this application.	es" responses by including the	date, circumstances, and/or o	harge if applicable. You	must attach OFFICIAL cou	urt dispositions and any o	ther
	role or probation or mand							
🔿 Yes 💿 No								
7. Have you ever been co	nfined or committed, includ	ding voluntary commitment, to a men	tal institution or hospital for tre	eatment of a mental disorder	or disorders?			
🔿 Yes 💿 No								
3. Are you currently, or ha	ive you ever been, addicted	d to alcohol; or, are you currently bein	ig treated for alcoholism?					
🔿 Yes 💿 No								
9. Are you addicted to or	have you ever been addicte	ed to controlled dangerous substance	is?					
🔿 Yes 💿 No								
10. Are you currently bein	g treated, or have you even	r been treated, for an addiction to cor	ntrolled dangerous substances					
🔿 Yes 💿 No								
			BACK	NEXT				
Js Terms Of Use Privacy Discla terstown Road, Pikesville, MD 212						A 🖸 🗟 🔳		
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						NATIONAL DAY COMPLETE COM	
Maryland State Police Licensing Portal					SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	🕒 LOG C
pplicant Information Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
plicant Questionnaire							
0						- 0	
						Step 3	
Yes No Yes Icense, certification, or	registration in Maryland or any other st	ate or jurisdiction ever be	en denied, suspended, revoke	d, or terminated?			
	registration in Maryland or any other st	ate or jurisdiction ever be	en denied, suspended, revoke	d, or terminated?			
Yes No I3. Have you ever been a member of the United State	e Armed Ferrer 7 Busy annuered use us	www.	eu of vour DD 214 ac east of th	a application process			
 Yes No 	is Armeu Porcesr II you answered yes, yo	zu will need to attach a co	by or your DD+214 as part of th	re application process.	60		
14. Are you an armored car guard?							
O Yes No							
15. Reason for a Handgun Permit (Be Specific):							
		0 (2500					



EMPLOYMENT SECTION

Please indicate if you have been employed within the past five years, this includes self-employment. If you have not been employed in the past five years, select "No" and click "**NEXT**":

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Maryland Sta	ate Police Licensing Pol	tal					SAVE & EXIT APPLICATION	O APPLICATION INSTRUCTIONS	€ LOG OUT
Applicant Information	Application Information	Questionnaire	Employment		Domestic Relationship	References	Documents	Summary	Signature
-		22							
	d within the past 5 years?								
🔘 Yes 💿 No									
				BACK	NEXT				

If you selected "**Yes**", indicating that you have been employed within the past five years, an **Employment Details** screen will appear. Click "**+ ADD EMPLOYER**" to add your current and/or previous employers:

WILKUM							MarstenLaar EbsenDepatary State	Aversies Oblice Services
Maryland Si	tate Police Licensing Po	rtal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	B LOG OUT
Applicant information	Application Information	Questionnaire	Employment	Domestic Relationshi	p References	Documents	Summary	Signature
Employment De	tails							
Have you been emplo	yed within the past 5 years?							
Yes No								
L.	st all current and past emplo	yers for the last five (5) years.						
			+ ADD EN	IPLOYER				
	Employer Name	Employer Address	Employment Start Da	ite Em	ployment End Date +			
			No employers ha					
			Click "Add Employer" to add a		cation.			
.3			BACK	NEXT				
Contact Us Terms Of Use Priva 1201 Reisterstown Road, Pikesvilli (410) 653.4200 (800) 525.5555	e, MD 21208					60 🖬 🗏		



Complete all required fields about your current/previous employment. If you are still employed with an employer, check the "**Currently Employed**" box. Once all information is complete, click "**SAVE**" to return to the previous screen.

ROLLAGO.						Manianian them.Orester Stat	Avenies Online Services
Maryland State Police Licensing Po	rtal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	IÐ LOG OUT
Applicant Information Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Employment Details Have you been employed within the past 5 years? Yes O No							
Employment Information							
Name of Employer: "				Employment Start Date *		loymen Qate *	
Employer Address *	City *		State *	MANUSATIT	✓ Zip Code *	Currently Employ	
Position/Job Duties *		Supervisor's Name *		Phone N	lumber *		
Reason for Leaving *							
		CANCEL	SAVE				

If you must add additional employers, click "+ ADD EMPLOYER" and repeat the above process. You must add each employer that you have been employed with in the past five years. If no additional employers are required, click "NEXT" to move on to the **Domestic Relationship** section:

AND MAR							Maryland.gav Ebone.Directory Stat	Apencies Online Services
Maryland S	tate Police Licensing Po	rtal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	IN LOG OUT
Applicant Information	Application Information	Questionnaire Emplo	oyment	Domestic Relationship	References	Documents	Summary	Signature
Employment De	tails							
Have you been emplo	yed within the past 5 years?							
• Yes O No								
	tet all account and must appear	yers for the last five (5) years.						
	ist an current and past emplo	yers for the last five (5) years.						
			+ ADD EM	PLOYER				
	Employer Name	Employer Address	Employment Start Dat	te Employme	nt End Date 🕶			
	TEST 2	Street Address: 1111 REISTERSTOWN R City: PIKESVILLE, State: MARYLAND, Zip Code: 21208		Currently E	mployed		/E	
	TEST 1	Street Address: 123. City: PIKESVILLE, State: MARYLAND, ZIp Code: 21208	01/01/2014	12/31/2018		C EDIT × REMOV	/E	
			BACK	GO TO SUMMARY				
Contact Us Terms Of Use Priva						FI 🔽 🗟 🗮		
1201 Reisterstown Road, Pikesvill (410) 653.4200 (800) 525.5555								



DOMESTIC RELATIONSHIP SECTION

Please list your closest domestic relationship such as your current spouse, significant other, or cohabitant or, if not applicable, list any former spouse within the past five years. Once all required information is completed, click "**NEXT**". If none of the previous examples apply to you, check the "**Not Applicable**" box and click "**NEXT**":

STORE A					Married and Print Avenuery Colo	Contra Manageria
Maryland State Police Licensing Portal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	🕒 LOG OUT
Applicant Information Application Information Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Domestic Relationship List your closest domestic relationship such as current spouse, significant of	ther, or cohabitant OR, if not app	blicable, any former spouse within the past	t 5 years.			
Not Applicable						
Spousal/Significant Other/Cohabitant Name *	Email					
Nature of Relationship *		Length of Relationship *				
Residence Phone Number *	Work Phone Number*		Cellular P	hone Number *		
		BACK NEXT				
Constact Us Terms Of Use Privacy Disclaimer 1201 Reisterstown Road, Niccolle, MD 21308				(f 🖸 🗟 🗮		



APPLICATION REFERENCES SECTION

Please submit the names of at least three reputable citizens who have known you for more than two (2) years. References cannot be related to you in any way. Click "+ ADD REFERENCE" to display the Applicant Reference page:

國軍統領							Marriand.gov Phone.Directory State	Avenies Online.Services
Maryland St	ate Police Licensing Po	ortal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	(LOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Application Refer Pursuant of the provision	ences is of Maryland Law, submit	the names of at least 3 r	eputable citizens who	have known you, the applica	nt, for more than two (2) years, and are not re	elated in any way to you, the ap	oplicant.	
				+ ADD REFER	RENCE			
	Full Name 🕶	1	Email	Ph	ione Number			
			Clic	No reference have k [*] Add Reference" to add a re				
				BACK NEXT At least 3 references	GO TO SUMMARY are required.			

Complete all of the required fields and click "SAVE":

							Merclan Press Destry Stat	eArmin ShineSmine
Maryland Si	tate Police Licensing	Portal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	DOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Application Refer	rence							
Full Name: *				Err	nall			
Street Address *		Apt#/Suite		City *	State *	◆ Zip C	ode *	
Name of Employer*								
Residence Phone Num	ber *		Employer's Pho	ine Number *		Cellular Phone Number *		
				CANCEL	SAVE			



Repeat the above process until the required three references have been entered. Additional references may be submitted. Once all references have been entered, click **"NEXT"**:

							Maryland gav Phone Directory Sta	te Agencies Online Service
Maryland S	State Police Licensing P	Portal				SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	😝 LOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Application Refe		the names of at least 3 r	anutable citizens who	have known you the ann	licant, for more than two (2) years, and are n	of related in any way to you, the a	policant	
Pursuant of the provisio	na ol maryland caw, suorin	the names of at least 5 h	eputable citizens who	+ ADD RE	an anna	ot related in any way to you, the c	ppican.	
				+ ADD R	PERENCE			
	Full Name +		Email		Phone Number			
	REF TEST 3RD	(4	N/A		Cellular Phone#: (123) 456 - 7890	C EDIT × REMOVE		
	REF TEST 2ND	1	N/A		Employer's Phone#; (410) 123 - 4567	C EDIT K REMOVE		
	REF TEST	ð	N/A		Residence Phone#: (410) 456 - 7890	REMOVE		
				BACK NEXT	GO TO SUMMARY			

DOCUMENTS SECTION

On the **Upload Documents** page, you will find two types of document requirements:

- 1. **Required for Submission Documents** documents that are required at time of submission of your application. Failure to submit these documents will result in the application being rejected by the Licensing Division and returned to the applicant. The applicant will then be required to upload the missing documents and re-submit the application. These documents include the following:
 - a. PASSPORT SIZE PHOTO
 - b. CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION
 - c. LIVE-SCAN FINGERPRINT RECEIPT
- 2. **Required for Investigation Documents** documents that will be required in order to complete the handgun permit background investigation. By law, these documents are not required for the submission of a handgun permit application, however, failure to provide these documents at the time of submission will prolong the application process.

Document formats acceptable for uploading include the following:

- PDF
- JPG
- JPEG
- PNG
- DOC
- DOCX



File sizes are limited to a maximum size of 5MB. Additional instructions for uploading files is located in the following sections:

FOR FOR					Maryland.gov Phone Directory State	Adentities Online Services
Maryla	and State Police Licensing Portal			SAVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	\varTheta LOG OUT
Applicant Informa	tion Application Information Questio	nnaire Employment Domestic Relation	iship References	Documents	Summary	Signature
Upload Docu	iments					
Based on the select your application.	tions made in the application process, these	are the documents recommended to upload prior to su	ibmission. Please be aware that	t failure to attach the required documents before si	ubmission to MSP will delay the	processing of
You may upload ar	ny .PDF, .JPG, .JPEG, .PNG, .DOC, or .DOCX file	up to 5MB in size.				
You must click the	'ATTACH DOCUMENT' button to upload/attac	ch.				
Required for	Submission Documents:					
The document(s) li	sted here are required for submission of you	ir application.				
Doct	ument Type	Description	File Name			
PASS	PORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE HAT, NO DARK GLASSES.	NO N/A		T	
		SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR		Search Qualified Hand	un instructor	
	IFICATE OF HANDGUN TRAINING OR DOCUMENTAT XEMPTION		N/A	l am exempt from t	ne training requirement	
FING	ERPRINTS	ALL "ORIGINAL" AND "SUBSEQUENT" APPLICATIONS REQL FBI AND CIIS FINGERPRINT SUBMISSIONS. PLEASE ATTACH COPY OF YOUR LIVE-SCAN FINGERPRINT RECEIPT.		± ATTACH DOCUMEN	1	

Required for Investigation Documents:

The document(s) listed here are required for completion of the Handgun Permit background investigation. Please be aware that providing these documents at the time your application is submitted may reduce the time needed to process your application.

ocument Type	Description	File Name	
OPY OF TRADERS LICENSE OR BUSINESS LICENSE	THIS IS REQUIRED IF YOU ARE APPLYING AS AN OWNER OR EMPLOYEE OF A BUSINESS OR FOR PROFESSIONAL ACTIVITIES.	N/A	ATTACH DOCUMENT
PROOF OF BUSINESS / ORGANIZATION EMPLOYMENT	A LETTER FROM THE APPLICANT'S EMPLOYER/ORGANIZATION ON BUSINESS STATIONERY IS REQUIRED. THE LETTER MUSILE REPUICITLY STATE THAT THE EMPLOYER IS REQUESTING THAT THE APPLICANT CARRY A HANDGUN WHILE CONDUCTING BUSINESS ACTIVITES. THIS LETTER MUST ALSO DESCRIBE. IN DETAIL THE NATURE OF THE BUSINESS ACTIVITES THAT THE ANTONIALS CONDUCTING BUSINESS. ACTIVITES AND POR INDIVIDUALS CONDUCTING BUSINESS. ACTIVITES AS AN EMPLOYEE OF A BUSINESS. ACCEPTED FORMS OF DOCUMENTATION INCLUDE A RECENT W2. WA, PAYCHECK STUDE, OG THER OFFICIA VILLOBE ARECENT W2. W4, PAYCHECK STUDE, WASHTER, CONDUCTING VOLUNTEER RUMERES AND WASHTER. AND COMPANY AND WASHTER OFFICIAL VILLOBE ARECENT W2. W4, PAYCHECK STUDE, WASHTER, CONDUCTING VOLUNTEER RUMERES AND WASHTER. AND COMPANY AND WASHTER OFFICIAL VILLOBE ARECENT W2. W4, PAYCHECK STUDE, WASHTER, CONDUCTING VOLUNTEER	N/A	ATTACH DOCUMENT
	BACK	NEXT	
Of Use Privacy Disclaimer koad Pilesville MD 21208			F) 🖸 🖾 🗮



PASSPORT SIZE PHOTOGRAPH INSTRUCTIONS

Passport Size Photograph Requirements: Photographs must be 2 X 2 inches or a maximum of 600 pixels wide by 600 pixels high. Photographs shall be head and shoulder passport type with a white background, full face with no hats or dark glasses.

NOTE: For applicants wishing to convert their photographs directly from their iPhone or Android smartphones, there are various apps in the Apple App Store and Google Play Store for this purpose. It is recommended to search for "passport photo". You can use the links below from your smartphone to access the respective app store:

Apple App Store: <u>http://itunes.com/apps</u>

Google Play Store: <u>http://play.google.com/apps</u>

Applicants may also use a personal computer (PC) to crop a photograph to the above size requirements. Applicants needing assistance editing a photograph may utilize the U.S. Department of State Photo Tool by following the instructions below:

1. Using either the Internet Explorer or Microsoft Edge web browser, access the U.S. Department of State's official Passport Photo website at the link below:

https://travel.state.gov/content/travel/en/passports/requirements/photos.html

2. Click on the link labeled "Photo Tool" under the "Already have a photo?" section on the right:

	Congressional Liaiso	n Special Issuand	ce Agency U.	S. Passports	International Travel	U.S. Visas	Intercountry Adoption	International Parental Child Abduction	
	Apply For or Renew My Passport	After I Apply	Passport Requirement	s Legal Matters	\$				
Travel State Gov > U.S. Passp	oris > Passport Requirements > Pas	sport Photos					Print	🖀 Email 🛉 Facebook 🎔 Twitter 🕂 More	
Passport Fees	P	assport Photos					_		
Passport Forms	Yo	u must provide one photo	o with your passport app	ication.			Alrea	ady have a photo?	
Passport Photos	Al	our photo policies apply	to both adults and child	en under age 16. We ha	ve a few exceptions to our photo p	policies for infants.			\sim
Where to Apply	Ph	oto Basics					Crop	your photo to the right size using our Photo Tool.	
Processing Times		 Submit a color photo, Use a clear image of 	, taken in last 6 months your face. Do not use filt	ers commonly used on s	social media.		Thi	s tool only works when browsing with Edge and	
Citizenship Evidence		 Have someone else to Take off your eyeglas 	, ake your photo. No selfie	· · ·				Internet Explorer.	



3. Once the Photo Tool loads, follow the instructions at the top of the screen to select, position and crop the photograph. If more detailed instructions are required, click the "**Help**" button on the left side of the screen:



4. Once you have completed the edits to your photograph, click "Save Photo". Choose a filename and location to store your photograph on your computer. This will be the same location you will select when prompted to upload your photograph into the Handgun Permit Portal. The filename MUST end with ".jpg" to save correctly. In this example, the filename is "Passport Photo.jpg" and it is being saved in "Pictures" on a Windows 10 computer. Click "Save":





5. On the **Documents** page of the Handgun Permit Application, click the blue button marked "**ATTACH DOCUMENT**" next to "**PASSPORT SIZE PHOTO**" in the Required Documents List:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	N/A	▲ ATTAGH DOCUMENT
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16-HOUR HANDGUN TRAINING COURSE)	N/A	Search Qualified Handgun Instructor
FINGERPRINTS	ALL "ORIGINAL" AND "SUBSEQUENT" APPLICATIONS REQUIRE FBI AND CIIS FINGERPRINT SUBMISSIONS, PLEASE ATTACH A COPY OF YOUR LIVE-SCAN FINGERPRINT RECEIPT.	N/A	± ATTACH DOCUMENT

6. Locate and select your photograph, then click "Open". The photograph will upload to the Portal:

🧐 Open	× 🚥	Britney 🗙 🛛 💼 The Da 🗙 📔 🛛 I	islamal: 🗙 🛛 New Tab. 🛛 🗙 🌼 Maryla: 🗙 🕂	
$\leftrightarrow \rightarrow \checkmark \uparrow \blacksquare$ > This PC > Pictures			\$	🦻 🖪 🊷 🚦
Organize New folder	Pictures Assport Photo			
Ithis PC		File Name		
File name: Passport Photo	All Files V TH A Open Cancel O t	N/A	ATTACH DOCUMENT	*
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION		N/A	Search Qualified Handgun Instructor	
FINGERPRINTS	ALL "ORIGINAL" AND "SUBSEQUENT" APPLICATIONS REQUIRE FBI AND CJIS FINGERPRINT SUBMISSIONS. PLEASE ATTACH A COPY OF YOUR LIVE-	N/A	ATTACH DOCUMENT	Ţ

IMPORTANT: The Portal will only accept Passport Photos with a maximum resolution of 600x600 pixels. The U.S. Department of State cropping tool automatically saves images at the 600x600 pixel limit. Do not change your image file once it is saved from the photo tool.



CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION

In this section, please use the **Search Qualified Handgun Instructor** list to locate the qualified handgun instructor who provided your handgun training course instruction. If you qualify for a training exemption, please select the "**I am exempt from the training requirement**" box located below the **Search Qualified Handgun Instructor** box. Documentation of your training exemption will be required to be attached to the application:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	НGР РНОТО.ЈРС	¥ REMOVE
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16- HOUR HANDGUN TRAINING COURSE)	N/A	Search Qualified Handgun Instructor

Once you have selected your qualified handgun instructor, the "ATTACH DOCUMENT" button will appear:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	HGP PHOTO.JPG	X REMOVE
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16- HOUR HANDGUN TRAINING COURSE)	N/A	Search Qualified Handgun Instructor ALLEN BOBBY (QHIL-2014-0076) ALLEN FLOYD (QHIC-2016-0139)
FINGERPRINTS	ALL "ORIGINAL" AND "SUBSEQUENT" APPLICATIONS REQUIRE FBI AND CJIS FINGERPRINT SUBMISSIONS. PLEASE ATTACH A COPY OF YOUR LIVE-	N/A	ALSTON ANDRE (QHIC-2019-0092) ALSTON BRIAN (QHIC-2019-0082)



See the following section for document attachment instructions.

Required for Submission Documents:

The document(s) listed here are required for submission of your application.



ATTACHING DOCUMENTS

From the **Upload Documents** section, identify the document type that you wish to attach and click "**ATTACH DOCUMENT**". In this example we will attach the certificate of handgun training:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	HGP PHOTO.JPG	× REMOVE
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16- HOUR HANDGUN TRAINING COURSE)	N/A	ALLEN FLOYD (QHIC-2016-013



Open				×
-	> Desktop > HGP App	✓ ^で	Search HGP App	٩
Organize 👻 New folder			*** *	•
Quick access Quick access Quick access Desktop Downloads Poctures Quick access Quick access Downloads Poctures Quick access Quick access Duick	HGP Photo	HGP trng cert Item type: JPG File Dimensions: 100 x 100 Size: 18.0 KB		
File <u>n</u> ame:	HGP trng cert	~	All Files <u>Open</u> Can	~ cel

Locate your training certificate file on your computer, select the training certificate file and click "Open":

The file (HGP TRNG CERT.jPG) has been successfully upload to the application:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
	SUBMIT DOCUMENTATION OF TRAINING		Qualified Handgun Instructor: FLOYD ALLEN (QHIC-2016-0139)
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16- HOUR HANDGUN TRAINING COURSE)	HGP TRNG CERT.JPG	I am exempt from the training requirement
			* REMOVE
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	ндр рното.јрд	× REMOVE

Success! - Upload successful!

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If an incorrect file was uploaded, click "REMOVE" and repeat the above process to attach the correct file:

Required for Submission Documents:

The document(s) listed here are required for submission of your application.

Document Type	Description	File Name	
CERTIFICATE OF HANDGUN TRAINING OR DOCUMENTATION OF EXEMPTION	SUBMIT DOCUMENTATION OF TRAINING EXEMPTION OR A QUALIFICATION SCORE SHEET (MSP 29-14) SIGNED BY A QUALIFIED HANDGUN INSTRUCTOR CERTIFIED BY THE MD STATE POLICE. (16- HOUR HANDGUN TRAINING COURSE)	HGP TRNG CERT.JPG	Qualified Handgun Instructor: FLOYD ALLEN (QHIC-2016-0139) I am exempt from the training requirement * REMOVE
PASSPORT SIZE PHOTO	PHOTOGRAPHS MUST BE 2"X2" HEAD AND SHOULDER PASSPORT TYPE WITH A WHITE BACKGROUND, FULL FACE, NO HAT, NO DARK GLASSES.	HGP PHOTO.JPG	* REMOVE
FINGERPRINTS	ALL "ORIGINAL" AND "SUBSEQUENT" APPLICATIONS REQUIRE FIAND CJIS FINGERPRINT SUBMISSIONS. PLEASE	N/A	ATTACH DOCUMENT

Once all documents have been attached, click "**NEXT**" to move on to the **Application Summary** page:

Required for Investigation Documents:

The document(s) listed here are required for completion of the Handgun Permit background investigation. Please be aware that providing these documents at the time your application is submitted may reduce the time needed to process your application.

+ ADD NEW DOCUMENT						
Document Type	Description	File Name				
VERIFICATION OF EMPLOYMENT	SUBMIT DOCUMENTATION OF YOUR TENURE IN AN ASSUMED RISK POSITION. THIS SHOULD INCLUDE A LETTER FROM YOUR EMPLOYER DOCUMENTING YOU ARE EITHER ACTIVE, RETIRED OR HAVE RESIGNED IN GOOD STANDING, OR OTHER DOCUMENTATION VERIFYING YOUR TENURE IN AN ASSUMED RISK POSITION.	HGP VERI OF EMP.JPG	★ REMOVE			

BACK NEXT



APPLICATION SUMMARY

The **Application Summary** page displays a snapshot of all of the sections of the application and if they have been completed or not. Any required information or documents that are missing will be displayed with a "**INCOMPLETE**" message noted in red. In the below example you can see that all three of the **REFERENCES** have not been completed. Clicking on the red "**INCOMPLETE**" button will take you directly to that section of the application:

STATE POLICE							Maryland.gov Phone Directory Stat	e Agencies Online Services
Maryla	and State Poli	ce Licensing Po	rtal		🖹 S	AVE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	🕒 LOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature

Application Summary

To submit your application, you must provide the missing or incomplete required information in the areas listed below.

APPLICANT INFORMATION			COMPLETE 📀
APPLICATION INFORMATION			COMPLETE 📀
QUESTIONNAIRE			COMPLETE 📀
EMPLOYMENT INFORMATION			COMPLETE 📀
DOMESTIC RELATIONSHIP			COMPLETE 🛇
REFERENCES			INCOMPLETE (3) 😂
Reference 1 is missing.			
Reference 2 is missing.			
Reference 3 is missing.			
DOCUMENTS			COMPLETE 🛇
	BACK	NEXT	



f У 🛅 🗮



Once all requirements for the incomplete section of the application have been completed, you can click **"GO TO SUMMARY**" to return to the **Application Summary** page:

🈽 Maryland State Polic	e Firearm R 🗙 🕂 🕂							-	٥	×
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👖 Apps 🔜 Manage	d bookmarks 🛭 🌀 Goog	gle 🥵 Portal 🈽 TP	HPU 🈽 Test Portal	😽 TP 77R 🕥 mdsp	.info 🔯 GAM-Statutes 🎆 COMAR 🕥 A	TF 2014 Firearms	State Laws 🛛 🚿	- Oth		
Maryl	and State Polic	ce Licensing Po	rtal		SAVE & EXIT APPLICATIO				G OUT	
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Sig	gnature	-

Application References

Pursuant of the provisions of Maryland Law, submit the names of at least 3 reputable citizens who have known you, the applicant, for more than two (2) years, and are not related in any way to you, the applicant.

Full Name - En		+ ADD REFERENCE							
	nail	Phone Number							
TEST 3 TE	ESTOR@GMAIL.COM	Residence Phone#: (123) 456 - 7890	🕼 EDIT	× REMOVE					
TEST 2 TE	ST2@GMAIL.COM	Residence Phone#: (410) 123 - 4567	C EDIT	× REMOVE					
TEST 1 TE	ST1@TESTCO.COM	Residence Phone#: (410) 653 - 4500	C EDIT	X REMOVE					

BACK

GO TO SUMMARY



Now that all application requirements have been met, the **Application Summary** now displays "**COMPLETE**" for all sections. Click "**NEXT**" to move on to the **Authorization of Release of Information** and **Signature** page:

STATE POLICE							Maryland.gov Phone Directory State	Agencies Online Services
Maryla	nd State Poli	ce Licensing Po	rtal		🖺 SA	VE & EXIT APPLICATION	APPLICATION INSTRUCTIONS	🕞 LOG OUT
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Signature
Application S	ummary			Your Application i	s Complete 오			
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		EMPLOYME	ENT INFORMATION			COMPLETE 📀		
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		DOCUMEN	TS			COMPLETE 🛇		
				BACK	NEXT			
Contact Us Terms Of Us 1201 Reisterstown Road, (410) 653.4200 (800) 52	Pikesville, MD 21208						₣ ⊻ 🖥 🗮	



AUTHORIZATION OF RELEASE OF INFORMATION AND SIGNATURE

Please review the **Authorization of Release of Information** and click on the box to the affirm your consent. At the bottom of the page enter your First Name and Last Name exactly as is was entered on the Applicant Information page:

Mand	and State Deli	ce Licensing Po	rtal				Maryland.gov		e Agencies Online Service:
		ce Licensing Po	ſĹdĬ				G AFFLICATION IN	ISTRUCTIONS	
Applicant Information	Application Information	Questionnaire	Employment	Domestic Relationship	References	Documents	Summary	Sigr	nature
Authorizatio	n of Release	e of Informat	ion						
Department of 5 concerning this processing this I, DONALD PICK retail mercantile the U.S. Veterar investigations re or against me, fr	State Police, whet applicant. The in- application. LE, authorize the e establishments s' Administration eports, the result or the internal pu	ther the said record tention of this auth full and complete of and retail credit ag n, and all military ar s of polygraph exar irposes of the Licer	Is are public or pr orization is to pro disclosure of the r gencies; medical an nd psychiatric faci minations, efficien nsing Division, Dep	rivate, and includir ovide information, records of education nd psychiatric con lities; public utility ncy ratings, compla partment of the St	g those which may which will be utiliz onal institutions, fi sultation and/or tr companies; emplo ints or grievances ate Police.	y be deemed to b ed, for investigati nancial or credit i eatment, includin pyment and pre-e filed by or agains	y/to any duly authoriz e of a privileged or co ive resources material institutions, and the re ng those hospitals, clin employment records ir st me; of complaints or riginal writing of my si	nfidential na for the purp ecords of con ics, private p ncluding back f a civil natur	ture pose of nmercial or practitioners, sground
0	tate of Maryland				0		ecretary and the Depa ys' fees arising out of		
			I, DONALD PICKLE,	, agree to the Auth	orization of Releas	e of Information.			
and I so indicate GROUNDS FOR	by signing below DENIAL OF THE		space. I agree to D/OR CRIMINAL F	supply any addition PROSECUTION.	nal information re	equested. FALSE I	est of my knowledge, INFORMATION WILL I		
First Name *	Last N	Name *							

Pay by Mail

SUBMIT TO MARYLAND STATE POLICE AND PAY BY MAIL

Upon submission of your application, you will receive an email with instructions on how to submit your application payment. Please note, your application will not be processed until the full application payment is received by the Maryland State Police Licensing Division.

* Please note, payment by mail will delay the processing of your application until the full payment is received by Licensing Division.



Once you have consented to the **Authorization of Release of Information** and signed the application, red acknowledgment and date stamps will appear and the "SUBMIT TO MARYLAND STATE POLICE AND PAY BY MAIL" button will become active. Click "SUBMIT TO MARYLAND STATE POLICE AND PAY BY MAIL" to submit the application:

	I, DONALD PICKLE, agree to the Authorization of Release of Information.
	Authorization of Release of Information signed on: 09/28/2019
and I so indicate by	and affirm under penalties of perjury that the contents of this application are true and correct to the best of my knowledge, information and belief signing below in the designated space. I agree to supply any additional information requested. FALSE INFORMATION WILL BE SUFFICIENT NIAL OF THE APPLICATION AND/OR CRIMINAL PROSECUTION.
Warning: Any perso	on who willingly makes false statements on this application is guilty of a misdemeanor.
First Name *	Last Name *
donald	pickle
Application signed on:	: 09/28/2019 11:55 PM
	Pay by Mail
	SUBMIT TO MARYLAND STATE POLICE AND PAY BY MAIL
Pleas	Upon submission of your application, you will receive an email with instructions on how to submit your application payment. e note, your application will not be processed until the full application payment is received by the Maryland State Police Licensing Division.
	* Please note, payment by mail will delay the processing of your application until the full payment is received by Licensing Division.

BACK

You will then be returned to the **User Dashboard** and the application status will be listed as "**SUBMITTED**" or "**SUBMITTED (PENDING PAYMENT)**" if applicable:

77R APPLICATIONS	HGP APPLICATIONS 1 MESSAGES	ACCOUNT	
Application #	Status	Accepted Date	
19HGP000305	SUBMITTED (PENDING P)	AYMENT)	
19HGP000279	SUBMITTED (PENDING P/	AYMENT)	



PAYMENT BY MAIL

Once you have submitted your application, you will need to submit payment by mail if applicable. The below email will be sent upon submission of an application. It is recommended that you print a copy of the email and attach your payment to it prior to submitting it to the Maryland State Police by mail or hand delivery:

From: <<u>admin_HGP_ST@mspbridge.gov</u>>

Date: Sun, Sep 29, 2019, 12:03 AM Subject: MD HGP - Your Maryland Handgun Permit Application Has Been Submitted Without Payment To: Verification <<u>dpicklejr@gmail.com</u>>

Dear DONALD,

Your Handgun Permit (HGP) application has been submitted without payment to the Maryland State Police via the Licensing Portal. Your application number is: 19HGP000305.

PLEASE NOTE THAT YOU HAVE 14 DAYS TO SUBMIT COMPLETE PAYMENT.

Please note that Licensing Division cannot begin processing your application until the application fee has been paid. Once payment has been received and credited to your application, your application will be reviewed by the Handgun Permit Section for completeness of all required information. If your application is missing any of the required information or documentation, your application will be returned to you via the Licensing Portal for correction/addition of the items noted. When the application is complete, including receipt of the application fee, you will receive an email notification status has changed to "Application Accepted" and that processing of it has begun.

PLEASE PRINT THIS EMAIL AND INCLUDE IT WITH YOUR PAYMENT.

Payment may be submitted via personal/business check, money order or cashier's check, mailed to:

Maryland State Police, Licensing Division, Handgun Permit Unit 1111 Reisterstown Road Pikesville, MD 21208

THE CHECK MUST HAVE THE FIRST AND LAST NAME OF THE APPLICANT AND THE APPLICATION NUMBER WRITTEN ON IT. IF WE CANNOT DETERMINE TO WHICH APPLICATION THE PAYMENT IS TO BE APPLIED, YOUR APPLICATION CANNOT MOVE FORWARD FOR REVIEW.

You will receive application status updates via email as your application progresses. It is not necessary to contact the Handgun Permit Section for an update.



SHORTAGE

If an application is submitted without all of the required documentation, it may be placed into a Shortage status and returned to the applicant with instructions as to what is missing or what additional information is required. In the below example, the application was shorted for more information about a domestic relationship and references. By clicking on the red "**INCOMPLETE**" button, you will be taken to the section of the application that requires corrections or additional information:

🔄 Inbox (2.086) - donald pickle@m 🗙 🕴 New Tab	× 💽 Maryland State Police	Firearm × +		_		- a x
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🔢 Apps 📑 Managed bookmarks 🎯 Google 😻 Portal	😽 TP HPU 😽 Test Portal 😽 TP 776. H	ð méspunfo [🕅 GAM-Statutes [😫 COMAR 🖉	ATF-2014 Firearms	🗢 🛞 TATE MO Code 🛛 💽 - MOSP Web Help D	👔 Licensing Division 📑 Attp://po	etal mideo
Applicant Information Application Information	n Questionnaire	Employment Domestic Relationship	References	Documents	Summary	Signature
Application Summary						
	To submit your ap	plication, you must provide the missing o	r incomplete required infor	mation in the areas listed below.		
		(The application has not be You have 5 days left t				
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	DOMESTIC RELATIONS	HIP				
	Domestic Relationshi Need more information					
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	DOCUMENTS			COMPLETE O		
		ВАСК	NEX7			
Contact Us. Terms Of Use. Privacy Disclaimer 1201 Reiszenstown Road, Pikesville, MD 21208					fi 🔽 🗟 🗮	



Once all of the shorted information has been corrected, the **Application Summary** will indicate that all sections are **COMPLETE.** Click next to move to the **Authorization of Release of Information** and **Signature** page. See the previous section for further information for completing the **Authorization of Release of Information** and **Signature** page and submitting the application to the Maryland State Police.

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Maryland S	tate Police Licensing Po	ortal					SAVE & DUT	APPLICATION	APPLICATION INSTRUCTIONS	E LOG OUT
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