

**TOWN OF NARRAGANSETT  
POLICE DEPARTMENT**

**40 Caswell Street • Narragansett, RI 02882 • Chief Kyle Rekas  
Tel. (401) 789-1091 • TDD (401) 782-0661 • Fax (401) 789-8819**

**Letter of Explanation**

Attached to this letter is an application for a license to carry a concealable weapon. Please read and thoroughly complete the application prior to submitting it to the Chief of Police. An incomplete and or illegible application will delay the review process. The Narragansett Police Department strives to create a process that does not make it unduly difficult for a member of society to acquire a license or permit to carry a concealed pistol or revolver as authorized under Rhode Island General Law 11-47-11. However, the department has a responsibility to properly vet the application to ensure the following two components of the law have been met.

1. Age and residency requirement: the applicant must be twenty-one (21) of age or older, have either a bona fide residence or place of business within the Town of Narragansett or a bona fide residence within the United States and a license or permit to carry a pistol or revolver concealed upon his or her person issued by authorities of any other state or subdivision of the United States.
2. Suitability Requirement: the department must be satisfied that the applicant has demonstrated proof of ability to safely handle the firearm in question and that the applicant is a suitable person to be licensed.

Please note that the department will not administer the pistol/revolver qualification course for the applicant. For additional information a copy of the department's policy has also been included with the application.

Respectfully,



Chief Kyle Rekas

# Narragansett Police Department

40 Caswell Street, Narragansett, RI 02882

## APPLICATION FOR PERMIT TO CARRY A CONCEALED PISTOL

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

ADDRESS: \_\_\_\_\_  
Street name & number (no P.O. Boxes accepted) City or Town State & Zip

E-MAIL: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_  
(HOME) (BUSINESS) (OTHER)

SOCIAL SECURITY NUMBER: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

EMPLOYED BY: \_\_\_\_\_

\_\_\_\_\_  
(Employer's street name & number) (City or Town) (State & Zip)

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

ARE YOU A CITIZEN OF THE UNITED STATES? \_\_\_\_\_ HOW LONG \_\_\_\_\_

(If you are not a citizen of the United States, a copy of both sides of your alien registration card must be included with this application).

LIST ALL ADDRESSES FOR THE LAST THREE (3) YEARS, INCLUDING DATES AND LOCATIONS:

\_\_\_\_\_  
\_\_\_\_\_

(If necessary, please submit a separate sheet)

ATTACH PHOTOCOPY OF OUT-OF-STATE PERMIT OR LICENSE \_\_\_\_\_

HAVE YOU EVER HAD A LEGAL NAME CHANGE? \_\_\_\_\_

IF YES, PLEASE WRITE FORMER NAME: \_\_\_\_\_

PLEASE LIST NICKNAMES OR ALIAS USED BY YOU

\_\_\_\_\_

TWO (2) TYPES OF POSITIVE IDENTIFICATION MUST BE SUBMITTED: Ex. (1) Birth Certificate (2) Rhode Island or State Driver's License (3) Rhode Island Identification Card

A PHOTOCOPY OF ANY TWO (2) OF THE ABOVE SIGNED AND DATED BY A NOTARY PUBLIC, ATTESTING AS BEING TRUE COPIES WILL BE ACCEPTED. PASSPORT AND OTHER POSITIVE IDENTIFICATION WILL ALSO BE ACCEPTED.

**THREE (3) LETTERS OF REFERENCE ARE REQUIRED**

Name	Address/City/State/Zip	Tel.#	Yrs. Known
Name	Address/City/State/Zip	Tel.#	Yrs. Known
Name	Address/City/State/Zip	Tel.#	Yrs. Known

**NOTE: THE RI COMBAT COURSE IS FOR LAW ENFORCEMENT PERSONNEL ONLY  
ALL OTHERS MUST QUALIFY IN ACCORDANCE TO SECTION 11-47-15**

APPLICANT MUST QUALIFY AND INSTRUCTOR MUST COMPLETE SECTION BELOW WITHIN ONE (1) YEAR **PRIOR** TO SUBMITTING APPLICATION.

WEAPON QUALIFICATION SCORE CAL. OF WEAPON: \_\_\_\_\_  
AMY-I: \_\_\_\_\_ SCORE: \_\_\_\_\_ RI COMBAT: \_\_\_\_\_ SCORE: \_\_\_\_\_

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(Signature of N.R.A. Instructor or Police Range Officer)                      Date

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(Printed Name & Telephone Number of N.R.A. Instructor or Police Range Officer)

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(N.R.A. Number or Police Department Name)

PERSONS PROHIBITED FROM CARRYING OR POSSESSING ANY FIREARM:

Pursuant to Rhode Island General Law 11-47-6 certain persons are prohibited from purchasing, carrying, or possessing any firearm. These persons include, but are not limited to:

- I. A person under guardianship.
2. A person under treatment by virtue of being a mental incompetent.
3. A person who has been adjudicated or is under treatment or confinement as a drug addict.
4. A person under treatment or confined as a habitual drunkard.
5. A person convicted of a crime of violence.

Do any of the prohibitions to receiving a license to carry a weapon apply to you?

Yes, \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain:

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FACTS TO BE USED IN DETERMINING WHETHER THE APPLICANT IS A SUITABLE PERSON TO RECEIVE A PERMIT TO CARRY A CONCEALED PISTOL OR REVOLVER

1. Have you ever been arrested, charged or summonsed for any offense?

If so, note date of arrest(s) and give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Has the applicant received a restraining order from any court?

3. Is the applicant presently, or has he/she been the subject of a restraining order from any court?

4. Have you ever refused to take a Breathalyzer test?

If so, give details including the name of the law enforcement agency involved.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Have you ever applied for a permit to carry a concealed pistol or revolver in another state or from the Rhode Island Attorney General, or a local city/town in Rhode Island?

If yes, write the state, city, town or jurisdiction

Were you denied? \_\_\_\_\_ If yes, give reason:  
\_\_\_\_\_  
\_\_\_\_\_

(If necessary, please submit a separate sheet)

6. Have you ever been under the care of a Psychiatrist or Psychologist? \_\_\_\_\_

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If necessary, please submit a separate sheet)

7. Have you ever been under guardianship or confined or treated for mental illness?

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If necessary, please submit a separate sheet)

AFFIDAVIT

I CERTIFY THAT I HAVE READ AND I AM FAMILIAR WITH THE PROVISIONS OF SECTION 11-47-1 TO 11-47-62, INCLUSIVE, OF THE GENERAL LAWS OF RHODE ISLAND, 1956, AS AMENDED, AND THAT I AM AWARE OF THE PENALTIES FOR VIOLATIONS OF THE PROVISIONS OF THE CITED SECTIONS. I FURTHER UNDERSTAND THAT ANY ALTERATION OF THIS PERMIT IS JUST CAUSE FOR REVOCATION.

\_\_\_\_\_  
(Applicant's Signature)

BEFORE A NOTARY PUBLIC:

SUBSCRIBED AND SWORN TO BEFORE ME IN \_\_\_\_\_  
RHODE ISLAND

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public Signature)

\_\_\_\_\_  
(Notary Public (name printed))

MY COMMISSION EXPIRES ON:

\_\_\_\_\_  
(Month) (Year) (State)

# Narragansett Police Department

40 Caswell Street, Narragansett, RI 02882

ORIGINAL ISSUE

October 1, 2008

LAST REVISED

March 6, 2025

NEXT REVIEW

March 6, 2028

**Policy 520.05**

**Concealed Carry Pistol Permits**

## 01. Policy

The Narragansett Police Department has the statutory authority to issue concealed carry pistol permits. The Department will exercise its discretion consistent with Rhode Island General Law 11-47-11. The Department does not discriminate in the issuance of a concealed carry pistol permits.

## 02. Purpose

The purpose of this policy is to provide procedures for the issuance of concealed carry pistol permits.

## 03. Discussion

### A. There are two requirements to obtain a permit to carry a concealed pistol or revolver.

#### 1. Age and residency requirement:

- a. The applicant must be twenty-one (21) years of age or older;
- b. The applicant must have either a bona fide residence or place of business within the Town of Narragansett or;
- c. a bona fide residence within the United States and a license or permit to carry a pistol or revolver concealed upon his or her person issued by authorities of any other state or subdivision of the United States.

#### 2. Suitability Requirement:

- a. Demonstrated proof of ability as required for license or permit. This provision is required by RIGL 11-47-15, which states the following.

*“No person shall be issued a license or permit to carry a pistol or revolver concealed upon his/her person until he/she has qualified with a pistol or revolver of a caliber equal to or larger than the one he/she intends to carry, that qualification to consist of firing a score on one hundred ninety-five (195) or better out of a possible score of three hundred (300) with thirty (30) consecutive rounds at a distance of twenty-five (25) yards on the army “L” target, firing “slow” fire. The “slow” fire course shall allow ten (10) minutes for the firing of each of three (3) ten (10) shot strings”.*

- b. No past unlawful, dangerous or violent conduct of the applicant that would justify denial at the Narragansett Police Department’s discretion even if it is not sufficient to disqualify the applicant as a matter of law from possessing a firearm.

- c. No past protection orders against the applicant pursuant to Chapter 15-5, Chapter 15-15, or Chapter 8-8.1 of the General Laws.

**Note:** The text of RIGL 11-47-11 contains a Reason Requirement. This was found to be unconstitutional in the 2022 SCOTUS decision, *New York State Rifle & Pistol Association Inc. v. Bruen*, and is therefore, no longer a requirement of the Narragansett Police Department concealed carry pistol permitting process.

## **04. Procedures**

### **A. Application Package**

1. The Narragansett Police Department will provide an application package. The package consists of this policy and a pistol permit application. The application package will be available in the lobby of the station and on the Town's website.

### **B. Applicants Responsibilities**

1. The official application form must be filled out completely by the applicant. The application must be in print or type or it will be returned.
2. The applicant must enclose two (2) passport-size photographs taken of them without headgear or glasses. This photo must be clear, colored picture of the head and face. The applicant's name must be printed on the back of each picture. No laminated photos will be accepted.
3. The application must be notarized.
4. Proof of qualification before a certified weapons instructor within 1-year of application submission. (i.e. NRA instructor or police range instructor, must be supplied along with a copy of the NRA/FBI firearms instructor's certification.)
5. Two types of positive identification must be submitted, photocopied, signed, and dated by a notary public attesting to be true copies.
6. Three (3) references and reference letters are required for new applications and are to be submitted along with the application. All three references are to type (not handwritten) a letter for the applicant pertaining to the gun permit that is signed, dated and must be notarized. Reference letters must be written by the reference, not the applicant and cannot be identical.
7. All letters must be dated. The department will not accept a photocopy of any signature.
8. All non-resident applicants must include a copy of their home state permit.
9. All new pistol permit applicants must have fingerprints submitted on a FBI fingerprint applicant card (Blue Card). Fingerprints will be taken at the Narragansett Police Department and must be signed by the applicant. This step is not necessary for renewal applicants.

10. The applicant for a pistol permit must submit the completed application package to the on-duty dispatcher.
11. The applicant will allow for a maximum of 90 days for the application to be processed.
12. Once completed the applicant must appear in person to pick-up the permit.
13. A forty-dollar (\$40.00) CHECK OR MONEY ORDER will be due upon issuance of the permit. No payments will be accepted when the application is submitted.
14. The application, photographs and fingerprint card become part of the records of the Narragansett Police Department and will NOT be returned.

C. Pistol Permit Review Board Responsibilities

1. The approval or denial of the application will be determined by a concealed carry pistol permit review board. The board will consist of the Chief of Police, the Captain-Administration and the Detective Lieutenant.
2. The board will review the completed application and criminal background check.
3. The board will check court records and other sources of information for pending criminal cases, restraining orders and/or discrepancies in the applicant's background.
4. The board will not issue a concealed carry pistol permit to any applicant who is prohibited from possessing or carrying a firearm under any state or Federal law (e.g. 18 U.S.C. Section 922(g)) or pursuant to any court order.
5. If the check described above does not disqualify the applicant from obtaining a concealed carry pistol permit, the board may conduct a personal interview to clarify information provided on the application.
6. Notification of approval or denial of the application will be through the mail or via telephone.
7. In the case of a denial the COP will document the reason(s) in a letter.
8. The department will include the evidence used to support the reason(s) when it is due to the suitability requirement.
9. Permits expire four (4) years from the date of issue. The renewal of the permit is the obligation of the permit holder. No notification of expiration of the permit will be sent.

D. Permit Holder Responsibilities

1. Approved holders should maintain, use and store their firearm or firearms in a responsible manner.

2. Permit holders are required to inform the Narragansett Police Department within 24 hours of becoming aware of the theft or loss of a weapon. If you do not report a loss or theft timely, your permit may be suspended.
3. Permit holders shall not duplicate or allow to be duplicated the permit or any part of it. Any violation of this provision is grounds to revoke.

By Order of:

Chief of Police