

**TOWNSHIP OF MAHWAH**

Application For Permit To Discharge Firearm (Incl. Bow & Arrow)  
According to Township Code 3-7.4

**PERMIT EXPIRES MARCH 1, 2024**

DETACH AND KEEP ATTACHED COPY OF TOWNSHIP CODE 3-7.4

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**ATTACH 2" PHOTO  
HERE**

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

FIREARMS ID CARD #: \_\_\_\_\_ HUNTING LIC.#: \_\_\_\_\_

PURPOSE OF FIREARM DISCHARGE (EXPLAIN) \_\_\_\_\_

LOCATION AREA WHERE FIREARM IS TO BE DISCHARGED \_\_\_\_\_

PROPERTY OWNER: (IF OTHER THAN APPLICANT – LETTER INDICATING PERMISSION TO SHOOT ON THAT PROPERTY MUST BE AFFIXED HERETO. ALSO, LIST NAME, ADDRESS AND TELEPHONE OF PROPERTY OWNER:

TYPE OF WEAPON TO BE DISCHARGED: MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

CALIBER: \_\_\_\_\_ SERIAL # OF WEAPON: \_\_\_\_\_

**THE UNDERSIGNED APPLICANT DOES HEREBY CERTIFY THAT:**

1. I am aware that it is illegal to carry or discharge any weapon within New Jersey on Sunday (NJS 23:4-24)
2. I have not become subject to any of the disabilities relative to arrest record or physical impairment as set forth under NJS 2C:39-7.
3. I have been given and am familiar with contents of Township Code 3-7.4 and am aware that discharging a firearm (including bow & arrow) is prohibited within 450 feet of any building, outbuilding, school and playground or across or within 450 feet of any state, county or municipal thoroughfare within the Township of Mahwah.
4. I am aware that I am subject to civil and criminal charges that might arise out of damage to property or injury and/or death to a person/persons as a result of my discharging a firearm/weapon within the Township of Mahwah.
5. Applicant is not prohibited by the statutes of New Jersey from using or possessing a firearm due to a violation of New Jersey's criminal statutes.
6. I am aware that falsification of any part of this application will void same and nullify permit if already issued.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***Do Not Write Below This Line***

**APPROVE \_\_\_\_\_ DISAPPROVE \_\_\_\_\_ DATE \_\_\_\_\_ PERMIT # \_\_\_\_\_**

\_\_\_\_\_  
**Chief of Police  
Township of Mahwah**