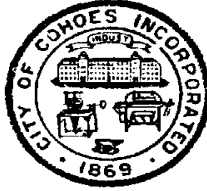


William Heslin  
Chief of Police



**Cohoes Police Department**  
Cohoes City Hall-97 Mohawk Street-Cohoes, New York 12047  
Telephone: (518) 233-2143- Fax (518) 233-7407

**PISTOL PERMIT APPLICANT'S PERSONAL CHARACTER REFERENCE**

**Name of Applicant:** \_\_\_\_\_

**Name of Reference:** \_\_\_\_\_

1. *By what name do you know the applicant?* \_\_\_\_\_

2. *Where does the applicant reside?* \_\_\_\_\_

3. *How long have you known the applicant?* \_\_\_\_\_

4. *Are you related to the application?* \_\_\_\_\_

➤ *If yes, please explain:* \_\_\_\_\_

5. *What is the applicant's business or occupation?* \_\_\_\_\_

6. *Give a brief description of the applicant's character and reputation as you know it.* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. *Do you recommend the issuance of the permit requested?* \_\_\_\_\_

8. *Do you know of any reason why it should not be issued?* \_\_\_\_\_

➤ *If yes, please explain:* \_\_\_\_\_  
\_\_\_\_\_

9. To your knowledge, has the applicant ever consulted a psychiatrist or undergone psychiatric treatment, either in a public or private institution? \_\_\_\_\_

10. Is the applicant a person of good moral character? \_\_\_\_\_

11. Without reservation, would you recommend the applicant for a pistol permit?

\_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*