Instructions
New Applications for a License to Carry a Concealed Deadly Weapon
(Retired Delaware Police Officer)

In order for your new application for a license to carry a concealed deadly weapon to be processed, the following steps must be completed:

1. **Photographs**
   - Include two (2) color passport-style photographs of the applicant.
   - Photograph must be taken within the six-month period immediately preceding the filing of the application.

2. **Filing fee of $65.00 must be paid at the time of filing.**
   - If application is hand delivered to the Prothonotary's Office, Cash, Money Order or Personal Check, made payable to "**PROTHONOTARY**" will be accepted.
   - Cash payments are not accepted by mail. Applications filed by mail shall NOT include cash. Applications filed by mail must include either a Money Order or Personal Check made payable to "PROTHONOTARY."

3. You must request a letter from the Chief of your agency verifying that you are in good standing with the law enforcement agency from which you retired. *(see attached)*

4. A Psychiatric Waiver must be filed with your application. *(see attached)*

5. **New Applications**
   - Applications may be filed at any time but must be filed in the County you reside.
   - You must file the new application and **a duplicate copy**.
   - You may hand deliver your application to the Attorney General's Office in New Castle County and the Prothonotary's Office in Kent and Sussex County, or
   - If all the requirements are met, mail your application as follows:

New Castle	**Kent County Prothonotary's Office**	**Sussex County Prothonotary's Office**
Special Investigations Unit, 5th Floor Delaware Department of Justice 820 N. French Street Wilmington, DE 19801 Contact Phone: (302) 255-0556	CCDW Permit 38 The Green Dover, DE 19901 GPS Address Kent County Courthouse 414 Federal Street Dover, DE 19901 Contact Phone: (302) 735-1901	CCDW Permit 1 The Circle, Suite 2 Georgetown, DE 19947 Contact Phone: (302) 856-5252

Retired Delaware Police Office

Psychiatric Waiver

I, _____ affirm that I have not been committed to a
Name
psychiatric facility since the date of my retirement on _____ .
Date

_____
Signature

_____
Date

Kathleen Jennings
Attorney General
State of Delaware
820 N. French Street, 5th Floor
Wilmington, DE 19801

Dear Ms. Jennings:

Retired Delaware Officer _____ is applying for a license to carry a concealed deadly weapon. Officer _____ retired from _____ on _____ after _____ years of service.

Agency Name *Retired Date*

According to the provisions of Del. Code, Title 11, Chapter 5, § 1441, the following procedures have been completed:

☐ This officer has applied for this license within 90 days of his/her retirement.

☐ This officer has applied for this license more than 90 days, but within 20 years of his/her retirement and:

1) The retired officer's criminal record has been reviewed and he/she has not been convicted of any crime greater than a violation since the date of his/her retirement and;

2) The retired office has no record of being committed to a psychiatric facility since the date of his/her retirement. He/She has forwarded a signed waiver stating he/she has not been committed to a psychiatric facility since the date of his/her retirement.

Based upon this review, I feel he/she is currently a retired police officer in good standing and is qualified to carry a concealed deadly weapon under the provisions of the law.

Sincerely,

_____
Signature

_____
Title