New York City Police Department
License Division
One Police Plaza
New York, NY 10038
(646) 610-5560

Acknowledgement of Person Agreeing to Safeguard Firearm(s)

Name of Applicant / Licensee: _____

Application / License Number:_____

Instruction to Applicant / Licensee: Please ask the person you have designated to safeguard and surrender your firearm(s) in the event of your death or incapacity to complete the information below and sign this acknowledgement before a witness.
(The person you designate must be a New York State resident.)

Print Name: _____ _____ _____
Last First M.I.

Address: _____ ____ _____ NY _____
Number & Street Name Apt City State Zip

Telephone Numbers: _____ _____ _____
Home Cell Business

I,_____
(Print name of person agreeing to safeguard firearms)
understand that the above-named applicant/licensee has designated me to safeguard and surrender his/her firearm(s) in the event that he/she dies or becomes incapacitated. I agree that upon learning of the death or incapacity of the licensee, I will immediately notify the New York City Police Department's License Division at (646) 610-5871 or (646) 610-5560, or by calling the local police precinct, and will follow their directions to safeguard and surrender his/her firearm(s).

Signature of person agreeing
to safeguard firearm(s): _____ Date:_____

Witnessed by (signature) _____

Witness' name (printed) _____

Please retain a copy of this document for your records