

WOOD COUNTY SHERIFF'S OFFICE

MARK WASYLYSHYN
Sheriff



RODNEY KONRAD
Chief Deputy

APPLICATION TO ACQUIRE, POSSESS, CARRY, OR USE DANGEROUS ORDNANCE (O.R.C. 2923.18)

Name: First _____ Last _____ Middle _____ D.O.B. _____

Address: Number _____ Street _____ City _____ County _____ State _____

Zip _____

State ID / Driver's License Number _____

Phone Number _____

Occupation _____ D.B.A. _____

Place or Places to be Kept or Carried _____

Place or Places Ordinance to be Used _____

Description Of Dangerous Ordinance _____

Where Ordinance Acquired _____

Purpose for use of Dangerous Ordinance _____

Competence of Person Using Dangerous Ordinance _____

.....
_____ Temporary Permit Exp. Date: _____ Fee Paid \$ _____
_____ Permit Exp. Date _____ Fee Paid \$ _____

I certify that I am not a fugitive from justice, am not under indictment, or have been convicted of any felony of violence or for any offence involving the illegal possession, use, sale, administration, distribution, or trafficking in any drug of abuse, nor am I drug dependent, or under adjudication of mental incompetence.

Date _____ Applicant Signature _____

Sworn before me, a Notary Public, This _____ Day Of _____ 20 _____

SEAL _____

.....
Upon investigation, it is determined the applicant is not otherwise prohibited by law and
Approved of Acquiring, Possessing, Carrying, or Using the Listed Dangerous Ordinance

Date: _____

Mark Wasylyshyn
Sheriff Wood County Ohio