

**HAWAII POLICE DEPARTMENT
APPLICATION FOR LICENSE TO CARRY FIREARMS
(ATTACHMENT A – EMPLOYER CERTIFICATION)**

PRIVATE SECURITY EMPLOYER CERTIFICATION

THIS IS TO CERTIFY THAT _____ IS EMPLOYED BY THE
PRINT APPLICANT'S NAME

BELOW MENTIONED COMPANY AS _____
JOB TITLE

THAT THE NATURE OF THE PERSON'S DUTIES REQUIRE THAT THE PERSON CARRY THE FIREARM DESCRIBED HEREIN FOR THE PURPOSE STATED, AND THAT THE APPLICANT IS QUALIFIED TO USE SAID FIREARMS AS REQUIRED BY THE RULES AND REGULATIONS OF THE POLICE CHIEF CONCERNING THE CARRYING OF CONCEALED FIREARMS AND THE CARRYING OF UNCONCEALED FIREARMS BY PRIVATE DETECTIVES AND SECURITY GUARDS.

SIGNATURE OF EMPLOYER OR REPRESENTATIVE

POSITION TITLE

PRINT NAME OF EMPLOYER OR REPRESENTATIVE

NAME OF COMPANY

COMPANY ADDRESS

SUBSCRIBED AND SWORN TO BEFORE ME THIS
____ DAY OF _____, _____

NOTARY SIGNATURE
PRINT NOTARY NAME: _____
NOTARY PUBLIC, STATE OF HAWAI'I
THIRD JUDICIAL CIRCUIT

MY COMMISSION EXPIRES: _____

NOTARY CERTIFICATION

Doc. Date: _____

No. of Pages: 1

1 1

Notary Name: _____

Third Judicial Circuit

Doc Description: Hawai'i Police Department Application for License to Carry Firearms, Private Security Employer Certification, of:

Notary Signature

Date