



ABERDEEN POLICE DEPARTMENT

114 Second Avenue Southeast
Aberdeen, SD 57401-4201

Property/Evidence Room: (605) 626-7980
Administration: (605) 626-7000
Fax: (605) 626-3505
City Attorney: (605) 626-7025

FIREARM RETURN REQUEST

FIREARM INFORMATION:		
Brand Name:	Model:	Caliber:
Serial Number:	Type:	Other:
Brand Name:	Model:	Caliber:
Serial Number:	Type:	Other:

REQUESTOR INFORMATION:		
Full Name (First, Middle, Last):	Suspect() Victim() Owner()	DOB:
Address:	Incident #:	Tag #:
		FBI #:
Phone #:	Soc. Sec #:	SID #:

I, _____, certify that I am the lawful owner/custodian/finder of the firearm(s) listed below and hereby request return of the firearm(s) to me by the Aberdeen Police Department (APD). **I acknowledge that the APD can only return the firearm(s) to me if it determines that it may lawfully do so or by a Court Order.** To assist the APD in determining if it may lawfully return the firearm(s) to me, I hereby state the following:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	1. Are you under indictment or information in any court for a felony, or other crime, for which the judge could imprison you for more than one year?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Have you ever been convicted in any court of a felony, or any other crime, for which you could have been imprisoned for more than one year, even if you received a shorter sentence or probation?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3. Have you ever been convicted in any court of a crime of violence? (See SDCL 22-1-2(9))
<input type="checkbox"/> Yes	<input type="checkbox"/> No	4. Are you a fugitive from justice?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	5. Are you an unlawful user of, or addicted to, marijuana or any depressant, stimulant, or narcotic drug or any other controlled substance?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	6. Have you ever been adjudicated mentally defective (which includes having been adjudicated incompetent to manage your own affairs) or have you ever been committed to a mental institution?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	7. Have you been discharged from the Armed Forces under dishonorable conditions?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	8. Are you subject to a court order restraining you from harassing, stalking, or threatening your child, an intimate partner, or child of such partner?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	9. Have you been convicted in any court of a misdemeanor crime of domestic violence in the last year?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	10. Have you ever renounced your United States citizenship?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	11. Are you an alien, illegally in the United States?

I further authorize the following:

(Initial each item below to request and authorize disclosure of information)

Criminal History Search. I hereby authorize the APD to conduct a criminal history search on me, which includes a search of the Interstate Identification Index and National Instant Criminal Background Check System databases.

Authorization For Disclosure Of Involuntary Commitment Information.

• I hereby authorize the South Dakota Human Services Center, any county board of mental illness, and any licensed professional, court, board, commission, or other lawful authority that may make mental health commitments (hereafter “committing authority”) to respond to the APD or its City Attorney and disclose whether or not I was adjudicated as a mental defective or committed to a mental institution as defined by 18 USC § 922(g)¹ and 27 CFR § 478.11² and to provide information regarding the date and tribunal or facility for any adjudication or commitment.

• This authorization is for the sole purpose of determining whether or not a firearm in the APD’s possession may be returned to me, at my request, under the provisions of state or federal law. To expedite this request, I authorize the committing authority to release the disposition information directly to the APD or its City Attorney for the limited purpose described above, and I expressly waive any right to privacy or confidentiality that I may have under state or federal law as to release of the above information in this proceeding.

A scanned or faxed copy of this authorization will be treated in the same manner as an original.

I hereby certify that the above information provided by me to the Aberdeen Police Department is true, accurate, and complete. I understand that the Aberdeen Police Department relies on this information to make a determination as to my legal rights to possess a firearm. I further understand that providing false information may be a violation of law.

Date: _____

Signature: _____

Print Name: _____

¹ 18 U.S. Code § 922 - Unlawful acts

(g) It shall be unlawful for any person— ...

(4) who has been adjudicated as a mental defective or who has been committed to a mental institution...

to ship or transport in interstate or foreign commerce, or possess in or affecting commerce, any firearm or ammunition; or to receive any firearm or ammunition which has been shipped or transported in interstate or foreign commerce.

² 27 CFR 478.11 Meaning of terms.

Adjudicated as a mental defective.

(a) A determination by a court, board, commission, or other lawful authority that a person, as a result of marked subnormal intelligence, or mental illness, incompetency, condition, or disease:

(1) Is a danger to himself or to others; or
(2) Lacks the mental capacity to contract or manage his own affairs.

(b) The term shall include -

(1) A finding of insanity by a court in a criminal case; and
(2) Those persons found incompetent to stand trial or found not guilty by reason of lack of mental responsibility pursuant to articles 50a and 72b of the Uniform Code of Military Justice, 10 U.S.C. 850a, 876b.

Committed to a mental institution. A formal commitment of a person to a mental institution by a court, board, commission, or other lawful authority. The term includes a commitment to a mental institution involuntarily. The term includes commitment for mental defectiveness or mental illness. It also includes commitments for other reasons, such as for drug use. The term does not include a person in a mental institution for observation or a voluntary admission to a mental institution.

THIS SECTION TO BE COMPLETED BY POLICE PERSONNEL

Criminal History run on: _____ Date of Criminal History: _____

Findings: _____

10-16 run on Firearm: _____ Run Date: _____

Findings: _____

Mental Health Commitment: NO / YES / INFORMATION NOT RECEIVED

Date Request Forwarded to BCSA: _____

Release Authorized by BCSA: NO / YES – Date: _____

Court Order Authorizing Release: NO / YES – Date Received: _____

RECEIPT UNDER PENALTY OF PERJURY

I certify, under penalty, that I am the lawful Owner / Guardian / Finder (circle one) of the property listed above, and that I have taken possession of the described property from the Aberdeen Police Department.

Signature: _____ Printed Name: _____

Date received: _____

The firearm(s) returned to Requestor by _____ on _____
(APD employee)

Date: _____ APD Employee Signature: _____

THIS FORM TO BE COMPLETED BY POLICE PERSONNEL



**ABERDEEN
POLICE DEPARTMENT**

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**PROHIBITED PERSON INQUIRY
RELEASE OF INFORMATION FOR FIREARM RETURN REQUEST
(SDCL 23A-37-8 and 27A-12-27(4))**

SEND to: SD Human Services Center Admission Office / County Board of Mental Illness Chairperson
RETURN to: Aberdeen Police Department (Fax: (605) 626-3505 Email: 188.apd@aberdeen.sd.us)

APPLICANT: _____ **D.O.B.:** _____

Maiden Name or Alias: _____ **Last 4 of SS#:** _____

Applicant named above has requested the return of certain firearm(s) in the property/evidence room of the Aberdeen Police Department (APD). The APD may only return the firearm(s) if the Applicant is not prohibited by law from possessing such firearm(s). SDCL § 23A-37-8. Federal law prohibits a person from possessing a firearm if he/she has been adjudicated as a mental defective or has been committed to a mental institution. Applicant, by completing and signing the Firearm Return Request accompanying this inquiry, authorized the South Dakota Human Services Center and any county board of mental illness to respond to the APD regarding the question below. SDCL § 27A-12-27(4).

APD Employee Requesting Information: _____ Daryl Vandover – Property & Evidence Manager

Date: _____ **APD Employee Signature:** _____

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WAS THE APPLICANT ABOVE NAMED ADJUDICATED AS A MENTAL DEFECTIVE OR COMMITTED TO A MENTAL INSTITUTION? (Definitions of the terms are set forth in the footnotes to the accompanying Firearm Return Request.)

_____ Yes _____ No

If "yes", provide the date and tribunal for such adjudication or the date and facility for such commitment.

_____ Tribunal / Facility

_____ Date of Adjudication / Commitment

By: _____
HSC Staff / County Board Chairperson Responding

_____ Date

(Print Name and Title)