

_____ Court of Washington For _____		No. _____  <b>Notice of Ineligibility to Possess Firearms (NTIPF)</b>
_____ Plaintiff vs.		
_____ Defendant.		

**To the Defendant:** You have been convicted of one or more of the following crimes committed against a family or household member:

Fourth Degree Assault  Coercion  Stalking  Reckless Endangerment  Criminal Trespass in the First Degree  Violation of a Protection Order or No-Contact Order restraining the person or excluding the person from a residence  Harassment committed on or after June 7, 2018.

You must **immediately surrender** all firearms and any concealed pistol license. **You may not possess, own or have under your control** a firearm and under federal law any firearm or ammunition or a concealed pistol license until your right has been restored by the court of record that ordered the prohibition on possession of a firearm or the superior court where you live, and by a federal court if required. Violation of these laws is a felony.

This document has been read to the defendant.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Defendant's Signature Judge/Commissioner/Pro Tem

Defendant's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

List any aliases \_\_\_\_\_

Residential Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth (month/date/year) \_\_\_\_\_ Driver's License/ID Number \_\_\_\_\_

Race \_\_\_\_\_ Sex \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_

Court NCIC # \_\_\_\_\_

Submit to: Dept. of Licensing, Business & Professions Firearms Unit, [firearms@dol.wa.gov](mailto:firearms@dol.wa.gov), (PO Box 9649, Olympia, WA 98507-9649).