

Clarksville Police Department

Off-Duty Carry Authorization Form

Name: _____ Badge Number: _____

Assignment: _____

Weapon Information:

Type: _____

Make: _____

Model: _____

Serial #: _____

Note: All off duty firearms must be approved, registered with the Department, qualified with on an annual basis, inspected on an annual basis and carried in a restraint device inconspicuously.

I have read and understand General Order – *CARRY OF FIREARMS BY OFF-DUTY OFFICERS*.

Officer's Signature: _____ Date: _____

All Clarksville Officers who want to carry an extra or off duty firearm are hereby required to have authorization from the Clarksville Police Commissioners. These firearms must be approved by the Chief of Police and inspected by the firearms instructor prior to qualification.

Firearms Instructor Inspection: _____

Chief of Police: _____

Police Commissioner: _____