
Petitioner (First/Middle/Last)

Magistrate Court Case No.: _____

By: (Parent/Guardian/Next Friend)

Family Court Civil Action No.: _____

v.

Circuit Court Case No.: _____

Respondent (First/Middle/Last)

Address

PETITION FOR FIREARMS RETURN

I, _____, hereby request the return of firearms surrendered/transferred pursuant to the Protective Order entered on the _____ day of _____, 20_____.

In support of this Petition, the Respondent states that the Protective Order entered above terminated or expired on the _____ day of _____, 20_____. The Respondent is not otherwise prohibited from possessing a firearm based upon any of the following federal or state laws:

1. I have not been convicted in any Court of a crime punishable by imprisonment for a term exceeding one year;
2. I am not a fugitive from justice;
3. I am not an unlawful user of or addicted to any controlled substance;
4. I am not habitually addicted to alcohol;
5. I have not been adjudicated as a mental defective or been committed to a mental institution;
6. I am not an alien illegally or unlawfully in the United States;
7. I have not been discharged from the armed forces under dishonorable conditions;
8. I have not renounced my citizenship of the United States;
9. I am not subject to a Domestic Violence Protective Order issued by this state or any other state.
10. I have not been convicted of a misdemeanor offense of assault or battery under the provisions of § 61-2-28 or § 61-2-9 of the West Virginia Code in which the victim was a current or former spouse, current or former sexual or intimate partner, a person with whom I have a child in common, a person with whom I cohabit or has cohabited, a parent or guardian, my child or ward, or a member of my household at the time of the offense, or have been convicted in any Court of any state or jurisdiction of a comparable misdemeanor crime of Domestic Violence.

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I fully agree to and understand that a criminal background check will be performed at the direction of the Court by a law enforcement agency and the return of my firearms is subject to the results of the background check.

My date of birth is _____ / _____ / _____. **MM/DD/YYYY - Enter in this format.**

My driver's license number is _____. **Enter State and Number.**

My social security number is _____. **###-##-#### - Enter in this format.**

My current address is _____.

Based upon all of the above, the Respondent respectfully requests that an Order allowing the return of all firearms to the Respondent be entered by the Court.

STATE OF WEST VIRGINIA
COUNTY OF _____, TO WIT:

I, _____, on oath or affirmation, say that I am the Respondent named in this Petition for Return of Firearms and that the facts contained herein are true, except that where they are stated to be upon information or belief, I believe them to be true.

Respondent's Signature

Taken, subscribed, and sworn or affirmed before me this _____ day of _____, 2_____.

Judge/Clerk/Notary Public

My commission expires on _____.