FORM FIST-1

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U.S DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS (BJS) (REJIS ACTING AS DATA COLLECTION AGENT)

2019/2020 FIREARMS INQUIRY STATISTICS (FIST)



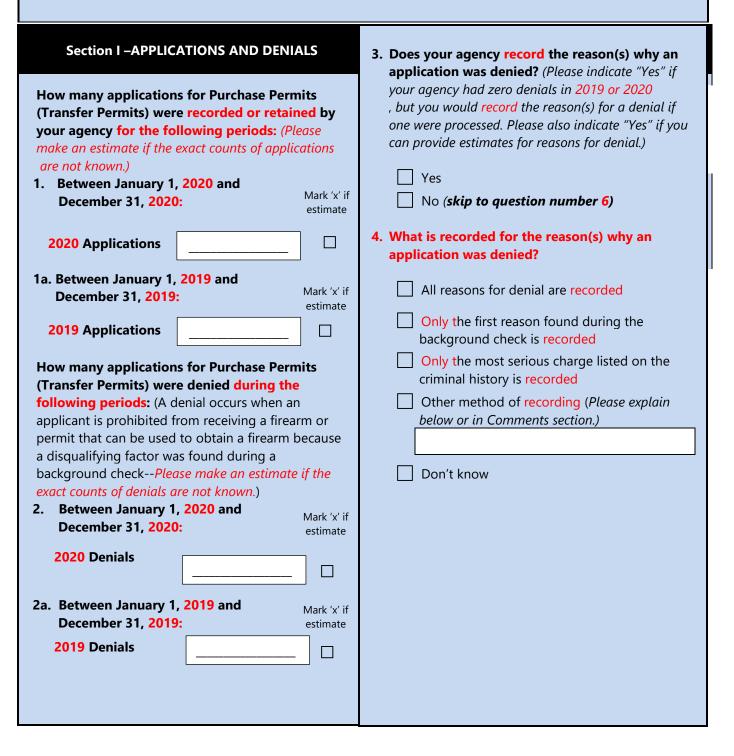
Annual Survey of Background Checks for Firearm Transfers and Permits

Please correct any errors in the name and address information that is printed below.

OFFICIAL AGENCY NAME (If different from above)		
9-DIGIT NCIC-ORI NUMBER		
PERSON COMPLETING THE FORM		
NAME	TITLE	
TELEPHONE	FAX	
E-MAIL ADDRESS		
 IMPORTANT - Please answer the following questions before proceeding with the questionnaire. Mark [X] in the appropriate box below. Did your agency record, process, or conduct background checks for firearm transfers or permits at any time between January 1, 2019, and December 31, 2020? Yes → If applicable, please list any other agencies for whom you conduct these activities: 		
(Agency Name(s))		
No \rightarrow The authorized permit recording, processing, or checking agency for your jurisdiction is:		
 If your response to the above question is "No" or if the following condition applies, you do not need to complete the questionnaire. Mark an [X] in the appropriate box below and return the survey using the instructions below. Agency no longer in existence Agency employed only part-time officers AND the total combined hours of work for these officers averaged less than 35 hours per week 		
RETURN INSTRUCTIONS		
 Please submit your completed form by using the web reporting option at rejis.org/FIST, mailing it to the Regional Justice Information Service (REJIS) in the enclosed postage paid envelope, or faxing each page to 1-314-535-1729. If you have any questions, comments, or feedback about the survey, please call the FIST project manager toll free at 1-800-531-2150, or send an e-mail to fist@rejis.org. 		
Please retain a copy of your completed survey for 1 year. Burden Statement		
	a, and a person is not required to respond to a collection of information, ng burden for this collection of information is estimated to average 25 ng existing data sources, gathering and maintaining the data needed, ments regarding this burden estimate, or any other aspects of this en, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW,	

INSTRUCTIONS FOR COMPLETING THE FORM

- Please mark 'X' in the appropriate boxes.
- If possible, please answer all questions for the entire calendar year (January through December) 2019 or 2020. If data are available for only part of the year, please supply any available information in the spaces provided.
- If the answer to a question is "not available" or "unknown," write "DK" in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "zero," write "0" in the space provided. <u>Please respond with zero only</u> when the actual total reported count is zero, as opposed to when the data are not known or unavailable.
- When an exact numeric response is not available, provide an estimate and mark the estimate box next to the number field. Please provide a brief explanation in Section II to describe how the estimates were calculated.
- Please do not leave any items blank unless otherwise directed.



 5. For denials recorded in 2020, why was the application denied? List total counts (including zeros, where applicable) for each reason for a denial. Please include all federal, state, and local law reasons for denial within the most appropriate category. Mark 'x' in the checkbox provided for any estimated counts. 		 6. If possible, please estimate what proportion (percentage) of your agency's denials are made up of the following reasons: Felony arrests, charges, and convictions Domestic violence convictions and
2020 Reasons Permits a. Felony indictment or charge	Mark 'x' if estimate	protective (restraining) orders State law prohibitor (if not included in above categories) Other reasons not included above (including juveniles and dishonorable discharge)
 d. Fugitive or outstanding warrant e. Domestic violence misdemeanor f. Domestic violence, protective or restraining 		 7. Do any of the counts you provided for any of the items throughout the survey cover only part of the year? Yes (please specify below or in Comments section):
order g. Addicted to or unlawful user of a controlled substance h. Mental health commitment or adjudication		-Which counts cover only part of the year -The months that are covered
i. Illegal or unlawful alienj. State law prohibitor (<i>if not included in above</i>		
categories) k. Local law prohibitor (if not included in above categories) l. Other reasons not		
included above (including juveniles and dishonorable discharge)		
(After answering this question, skip to q number 7)	juestion	

Section II - COMMENTS

Please include any comments that would better explain how your agency collects information for firearm transfers or permits, including the names of any permit or transfer types not listed on this form that you record, process, or conduct background checks for. If the reported totals are estimates please provide a brief explanation to describe how the estimates were calculated.