## **Request for Denial/Research Information**

Return to: BCI – Brady Section
PO Box 148280
Salt Lake City, UT 84114-8280
or
Fax 801-969-7265 – local
877-879-6228 – long distance

I am requesting information concerning my firearm denial/research.

Only limited information may be available on a research request.

|   | Date/_                     |
|---|----------------------------|
| Last Name   |                            |
| First Name  | MI                         |
| Date of Birth/  |                            |
| Phone #   |                            |
| Date of Denial/   |                            |
| Search Request # (if provided by FFL)                       |                            |
| Please indicate whether you would like your information fax | red or mailed back to you. |
| Return Fax #  |                            |
| Return Address  |                            |
|   |                            |
|   |                            |
|   |                            |
| Signature of Purchaser                                      |                            |
|   |                            |
| SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY                  | OF, 20                     |
| NOTARY  |                            |
| (Add Seal also)   |                            |