

Firearm Return or Claim Form

This form is only for the return of firearms and must be completed and returned to the Boynton Beach Police Department along with any required proof of ownership. Return completed form and any supporting proof of ownership in person or via e-mail to:

PoliceEvidence@bbfl.us .

Please allow up to seven business days from the date of submission for the property and case information to be reviewed.

BBPD Case # _____ Other Agency Case Number, if applicable _____

Claimant's Full Name: _____ Date of Birth: _____

Address: _____

Telephone # _____ E-mail Address: _____

Social Security Number (required) _____ State or Country of Birth (required) _____

(Information required for mandatory State and Federal inquiries regarding firearm ownership)

Firearm description including make, model, serial #, or any other specific identifying characteristics.

1) _____

2) _____

3) _____

(PLEASE USE ADDITIONAL CLAIM FORM(S) FOR ADDITIONAL FIREARMS)

I certify that I am the legal owner of the property being claimed, and further certify that I have not filed an insurance claim and have not received insurance reimbursement for loss of the property. Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

Claimant's Signature: _____

***** FOR ADMINISTRATIVE USE ONLY *****

Received: _____ Tech Initials: _____ Date Completed: _____

REMARKS: _____