

Carrying a Concealed Weapon (CCW) Endorsement

201.1 PURPOSE:

To provide a process for the issuance, renewal, denial, and revocation of CCW endorsements to honorably retired Probation Department peace officers, who were armed at some time during their course and scope of their employment pursuant to PC26300(c) and in accordance with applicable laws.

201.2 DEFINITIONS:

Honorably Retired Officer: Pursuant to PC16690, "...any peace officer who has qualified for, and has accepted, a service or disability retirement... 'honorably retired' does not include an officer who has agreed to a service retirement in lieu of termination."

201.3 RESPONSIBILITIES:

I. CCW Application Process

A. Initial application process and criteria.

1. Retired Officer's (RO's) must:

- (a) Be an honorably retired officer who was armed at some time during the course and scope of their employment. Pursuant to PC26305(a), no peace officer who is retired after January 1, 1989, because of a psychological disability shall be issued an endorsement to carry a concealed and loaded firearm.
- (b) Apply for the CCW endorsement to the Chief Probation Officer in writing.
- (c) Complete the Carry Concealed Weapon (CCW) Endorsement Request/Questionnaire (Attachment A).
- (d) Submit to an electronic records check (i.e., Live Scan). Records checks are subject to a fee pursuant to PC25455(b) and PC25905(b).
- (e) Provide proof of firearm qualification within one year immediately preceding the date of application. This requirement may be satisfied by utilizing a current department-issued range card.

B. Renewal application process and criteria.

1. RO's applying for renewal must:

- (a) Pursuant to PC25465, "Every five years, a retired peace officer... shall petition the issuing agency for renewal of the officer's privilege to carry a concealed firearm."

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- (b) Apply for the CCW endorsement renewal to the Chief Probation Officer in writing.
- (c) Complete the Carry Concealed Weapon (CCW) Endorsement Request/Questionnaire (Attachment A).
- (d) Complete and submit the results of an electronic records check (i.e., Live Scan). Records checks are subject to a fee pursuant to PC25455(b) and PC25905(b).
- (e) Provide proof of firearm qualification within one year immediately preceding the application for renewal.
- (f) Submit all documentation to the Chief Probation Officer no later than ninety (90) days prior to renewal date to ensure timely processing.

II. Professional Standards

- A. Professional Standards will receive requests for CCW investigations from the Office of the Chief Probation Officer.
- B. Upon receipt, Professional Standards shall investigate all requests for CCW's to determine if the RO has:
 - 1. Submitted all necessary documentation to process the CCW.
 - 2. Retired honorably.
 - 3. Since retirement, violated any departmental rules or state or federal laws that if committed by an officer on active duty, would result in that officer's arrest, suspension or termination.
 - 4. Met range qualification standards within the year immediately preceding the date of application.
- C. Shall submit the completed investigation to the Chief Probation Officer with a recommendation.
- D. Shall maintain a CCW file for each RO for at least five (5) years after the date of denial, revocation, or expiration.

III. Denials, Temporary and Permanent Revocations

- A. An RO may have the privilege to carry a concealed and loaded firearm denied or temporarily/ permanently revoked;
 - 1. By violating any departmental rule, or state or federal law that, if violated by an officer on active duty, would result in that officer's arrest, suspension, or removal from the agency.
 - 2. By engaging in conduct which compromises public safety.
- B. Denials (PC26310)
 - 1. An RO CCW may be denied prior to a hearing. In such cases, an RO, within 15 days of the denial, shall have the right to request a hearing. An RO who fails to request a hearing shall forfeit the right to a hearing.

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C. Temporary Revocations (PC26312)

1. Notice of a temporary revocation shall be effective upon personal service or upon receipt of a notice that was sent by first-class mail, postage prepaid, return receipt requested to the RO's last known place of residence.
2. The RO shall have 15 days to respond to the notification and request a hearing to determine if the temporary revocation should become permanent. If the RO fails to respond to the notice within the 15 day period, they shall forfeit the right to a hearing and the temporary revocation shall become permanent. The RO shall immediately return the CCW endorsed retirement identification to the department.
3. If a hearing is requested, good cause for permanent revocation shall be determined at a hearing in accordance with PC26320 and shall be held no later than 120 days after the request from the RO is received.
4. RO's may also waive the right to a hearing and immediately return the CCW endorsed retirement identification to the department.

D. Permanent Revocations (PC26315)

1. CCW endorsements may be permanently revoked only after a hearing, except pursuant to PC26312(c) and PC26315(c).
2. An RO whose CCW is to be revoked shall receive notice of the hearing. Notice of the hearing shall be served either personally on the RO or sent by first-class mail, postage prepaid, return receipt requested to the RO's last known place of residence.
3. From the date the RO signs for the notice or the date the notice is served personally on the RO, they have 15 days to respond to the notification. An RO who fails to respond to the notice for the hearing shall forfeit the right to a hearing and the CCW shall be permanently revoked. The RO shall immediately return the CCW endorsed retirement identification to the department.
4. If a hearing is requested, good cause for permanent revocation shall be determined at a hearing in accordance with PC26320 and shall be held no later than 120 days after the request from the RO is received.

E. Hearings (PC26320)

1. Hearings shall be held before a three-member hearing board. One member of the board shall be selected by the agency and one member shall be selected by the RO or their employee organization. The third member shall be selected jointly by the agency and the RO or their employee organization. Any decision by the board shall be binding on the agency and the RO.

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2. When notified of the revocation of the CCW endorsement by the hearing board, the RO shall immediately surrender the CCW endorsed retirement identification to the department pursuant to PC26325.

IV. Chief Probation Officer

- A. The Chief Probation Officer is the sole and final authority on the issuance, renewal, and temporary revocation of all CCW endorsements.

V. Issuance

- A. Upon receiving authorization from the Chief Probation Officer, Professional Standards shall coordinate the issuance/renewal of the CCW card.
- B. The card shall be in the following format pursuant to PC25460(c):
 1. 2x3 inch card
 2. Retiree photograph, name, and date of birth
 3. Date of retirement
 4. Name and address of the issuing agency
 5. The endorsement "CCW Approved"
 6. Date endorsement is to be renewed (5 years from date of issuance)
- C. CCW endorsed identification cards not delivered in person shall be mailed via certified mail.

201.4 ATTACHMENTS:

See attachment: [Carrying a Concealed Weapon \(CCW\) Attachment A \(Lexipol 6-22-23JF\).pdf](#)

Attachments

Carrying a Concealed Weapon (CCW) Attachment A (Lexipol 6-22-23JF).pdf



TRACY REECE
Chief Probation Officer

EDWARD BARRY
Assistant Chief Probation Officer

CARRY CONCEALED WEAPON (CCW) ENDORSEMENT REQUEST/QUESTIONNAIRE
(PC26300(c))

| | | | | | |
|------------------------------------|------------|-------------------------------|-----------------|------------------------|----------------|
| NAME (Print Last, First, MI) | | HIRE DATE | RETIREMENT DATE | YEAR ARMED | CLASSIFICATION |
| ADDRESS (Street, City, State, Zip) | | MAILING ADDRESS | | | |
| TELEPHONE NUMBER () | BIRTH DATE | DRIVERS LICENSE NUMBER/ STATE | | SOCIAL SECURITY NUMBER | |

Initial application for Endorsement to Carry a Concealed Weapon.

Renewal for Endorsement to Carry a Concealed Weapon.

Expiration Date: _____

I understand that if the CCW endorsement is granted:

- The issued identification card with the CCW endorsement is the property of the San Bernardino County Probation Department.
- The concealed weapon is personal use only and may not be utilized in the course of any employment.
- The authorization only applies in the State of California, wherein the carrying of a concealed weapon is authorized.
- I agree to promptly report any change in address to the Chief Probation Officer.
- I agree to promptly report the following:
 - Any changes in my medical/psychological fitness to carry a firearm;
 - Any commission of/arrest for a crime.
- I agree to promptly inform the Chief Probation Officer if I become aware of any reason I no longer qualify to maintain a CCW endorsement.
- The Chief Probation Officer may revoke a CCW endorsement for good cause at any time. All temporary and permanent revocations will be noticed in writing and Retired Probation Officers may respond to the notification within 15 days of receipt to request a hearing.

I am an Honorably Retired Probation Officer and request the Chief Probation Officers endorsement to carry a concealed and loaded firearm pursuant to PC26300(c). In completing this request, I authorize San Bernardino County Probation to conduct a criminal history records check on me in order to evaluate my request for a CCW endorsement. I also agree to provide San Bernardino County Probation with any requested medical records needed to complete an evaluation of my eligibility for a CCW endorsement.

PRINTED NAME

SIGNATURE

DATE



TRACY REECE
Chief Probation Officer

EDWARD BARRY
Assistant Chief Probation Officer

Applicant Name/Date: _____

QUESTIONNAIRE

In order to process your request for the issuance of an Endorsement to Carry a Concealed Weapon, you are required to answer the following questions. All questions must be answered and the information provided must be accurate and complete. Information provided in this questionnaire is for the purpose of determining CCW eligibility only.

1. Have you ever been denied a request for a CCW endorsement by this or any other Department?

NO YES

If YES, please explain by providing date(s), circumstances and disposition (use separate page if necessary).

2. Has your privilege to possess a firearm or to carry a concealed firearm ever been revoked?

NO YES

If YES, please explain by providing date(s), circumstances and disposition (use separate page if necessary).

3. Did you retire under "less than honorable conditions"?

Less than honorable conditions include but are not limited to, being under investigation for misconduct, in lieu of termination or punitive action, pending charges for a crime or for psychiatric issues/conditions.

NO YES

If YES, please explain by providing date(s), circumstances and disposition (use separate page if necessary).

4. Are you addicted to the use of drugs/narcotics?

NO YES

If YES, please provide details regarding the type of drug/narcotic, frequency of use, etc. If you are receiving medical care/treatment, (or have received same) for the use of drugs/narcotics, include the name, address and telephone number of attending physician (use separate page if necessary).

5. Have you, within the past ten years been arrested for and/or convicted of any offense?

NO YES

If YES, provide the offense(s), date(s), location, law enforcement agency, court, case number and final disposition (use separate page if necessary).

Applicant Name/Date: _____



TRACY REECE
Chief Probation Officer

EDWARD BARRY
Assistant Chief Probation Officer

6. Have you, within the last ten years, suffered from or been treated for an emotional, nervous or psychiatric disorder?

NO YES

If YES, list the disorder(s), diagnosis/treatment date(s), name, address and telephone number of attending physician (use separate page if necessary).

7. Have you, within the last ten years, been admitted/committed, voluntarily or involuntarily, to any hospital, mental institution, or other medical/treatment facility for the treatment of a psychiatric, emotional or nervous disorder or for the use of alcohol, drugs, or narcotics?

NO YES

If YES, list the condition(s) for which treatment/care was received, date(s) of admission/commitment, length of treatment/care, name, address and telephone number of hospital, mental institution, or other medical treatment facility, date(s), discharge and name(s), address(es), and telephone number(s) of attending physician(s) (use separate page if necessary).

8. Have you, within the last ten years, experienced any health problem(s) which caused you to be temporarily or permanently unable to care for yourself, i.e., loss of consciousness, heart attack, stroke, serious accident or other physical impairment?

NO YES

If YES, provide a description of illnesses, medical conditions, or injuries, date(s), name, address and telephone number of attending physician (use separate page if necessary).

I understand that any false statement and/or deliberate misrepresentation, whether by omission or commission, will result in my application being automatically and irrevocably rejected from further consideration. I declare under penalty of perjury according to the laws of the State of California, that the foregoing is true and correct.

PRINTED NAME

SIGNATURE

DATE