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Lawyer's Bar Number: _____

For Clerk's Use Only

Representing ☐ Self, without a Lawyer or ☐ Attorney for ☐ State OR ☐ Defendant

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

STATE OF ARIZONA, Plaintiff
-vs-

Case Number: _____

APPLICATION UPON DISCHARGE TO: (check all that apply)

☐ RESTORE CIVIL RIGHTS

☐ RESTORE FIREARM RIGHTS

A.R.S. §§ 13-905, 13-906, 13-907, 13-908, and 13-910

☐ REQUEST FOR RECONSIDERATION

(for applications previously denied)

☐ Civil Rights

☐ Firearm Rights

DEFENDANT (First, MI, Last)

Date of Birth: _____

Applicant is: ☐ Defendant
☐ Attorney for Defendant
☐ Probation Officer
☐ Guardian

SECTION I: CONVICTION(S)

A Judgment of Guilt was entered against me, the Defendant, on the _____ day of

_____, 20_____, on the conviction of:

1. Count I: _____

2. Count II: _____

3. Count III: _____

4. Count IV: _____

☐ Additional counts continue on a separate page.

SECTION II: STATE CONVICTION: (For federal convictions, see SECTION III.)

☐ A Judgment of Guilt was entered against me in the Superior Court of Arizona in Maricopa County.

1. ☐ The above stated judgment of guilt and conviction for a felony is my first felony conviction in this or any other State and this application is for restoration of right to possess or carry firearm only.

NOTE: If this is your first felony conviction in this or any other State, any civil rights lost or suspended by the conviction are automatically restored if you completed a term of probation or received an absolute discharge from imprisonment and paid any restitution imposed; however, your right to possess or carry a firearm requires an application under this rule. Refer to Section VII of this application.

OR

☐ I have also been convicted of a felony in the following Court(s):

Court Name: _____ in case number _____

Court Name: _____ in case number _____

(Attach a separate page for additional cases and convictions)

2. ☐ I completed the conditions of probation. The Probation Department's order discharging me from probation is in the court file or attached to this form.
3. ☐ I received a *Certificate of Absolute Discharge from Imprisonment* from the Arizona Department of Corrections on a date two (2) or more years before today's date, AND have attached a copy of Certificate in this petition.
4. ☐ I have complied with all required terms of probation (including all employment, classes, community restitution, victim restitution or other court ordered monetary obligations, drug/alcohol testing, or other requirements.)

5. ☐ **I HAVE NOT** complied with all terms of my sentence. EXPLAIN:

SECTION III. FEDERAL CONVICTION (For State convictions see SECTION II.)

- ☐ A Judgment of Guilt was entered against me, in United States District Court for the District of _____, on the _____ day of _____, 20____.

1. ☐ The above stated judgment of guilt and conviction for a felony is my first felony conviction in this or any other State and this application is for restoration of right to possess or carry a firearm only.

NOTE: If this is your first felony conviction in this or any other State, any civil rights lost or suspended by the conviction are automatically restored if you completed a term of probation or received an absolute discharge from imprisonment and paid any restitution imposed; however, your right to possess or carry a firearm requires an application under this rule. Refer to Section VII of this application.

OR

- ☐ I have also been convicted of a felony in the following Court(s):

Court Name: _____ in case number _____

Court Name: _____ in case number _____

(Attach a separate page for additional cases and convictions)

2. ☐ I was sentenced to and successfully served a term of federal probation and received an Affidavit of Discharge from the judge who discharged me. I have attached a copy to this petition.

Case Number: _____

3. ☐ I was sentenced to and successfully served a federal prison term. I have attached a copy of the Federal Bureau of Prisons a Certificate of Absolute Discharge, or other official documentation provided by the Bureau of Prisons that indicates successful discharge from Imprisonment on a date two (2) or more years before today's date.
4. ☐ I have complied with all required terms of probation (including all employment, classes, community restitution, victim restitution or other court ordered monetary obligations, drug/alcohol testing, or other requirements.)
5. ☐ **I HAVE NOT** complied with all terms of probation. EXPLAIN:

SECTION IV. VICTIM RESTITUTION AND COURT ORDERED MONETARY OBLIGATIONS

1. Have you paid victim restitution in full? ☐ YES ☐ NO

IF NO, a restoration of rights will be denied without a showing of extraordinary circumstances. If you believe you have extraordinary circumstances explain below. (Attach documentation you think is relevant for the court's consideration.)

2. Have you paid all other court-ordered monetary obligations in this case (criminal fines and fees) in full?

☐ YES ☐ NO If no, please explain:

For a State case, in some circumstances you may be eligible to apply to the court to mitigate the amount owed or convert monies owed to community restitution. (This does not apply for Federal convictions).

SECTION V. PRIOR RESTORATION OF RIGHTS

1. Have you previously applied to have your rights restored? ☐ Yes ☐ No

If yes, what was the date of your last application? _____

2. Have you been granted the restoration of your rights previously? ☐ Yes ☐ No

3. Have you been denied the restoration of your rights previously? ☐ Yes ☐ No

SECTION VI. PENDING CASES AND ACTIVE WARRANTS

1. Are there any open criminal cases against you? ☐ Yes ☐ No

2. Do you have an active warrant? ☐ Yes ☐ No

If yes to either question above, please explain:

SECTION VII. RESTORATION OF FIREARM RIGHTS

NOTE: Arizona Revised Statutes require: If the person was convicted of an offense which would be a dangerous offense under section 13-704, the person may not file for the restoration of the right to possess or carry a firearm. If the person was convicted of an offense which would be a serious offense as defined in section 13-706, the person may not file for the restoration of the right to possess or carry a firearm for **ten (10) years** from the date of the person's absolute discharge from imprisonment or discharge from probation. If the person was convicted of any other felony offense, the person may not file for the restoration of the right to possess or carry a firearm for **two (2) years** from the date of the person's absolute discharge from imprisonment or discharge from probation.

1. ☐ I was convicted of a felony offense not listed in A.R.S. §§ 13-704 or 13-706 and it has been **two** years since absolute discharge from imprisonment or probation.
2. ☐ I was convicted of a serious offense as defined in A.R.S. § 13-706 and it has been **ten** years since absolute discharge from imprisonment or probation.
3. ☐ I was convicted of a dangerous offense as defined in A.R.S. § 13-704. (If yes, you are not eligible to file for restoration of the right to possess or carry a firearm.)

If you are requesting that your civil right to possess a firearm be restored, please write your reasons for the request below:

I understand that even if I am granted the right to possess a firearm under Arizona law, it may not give me the right to possess a firearm under federal law.

SECTION VIII. OTHER INFORMATION FOR THE COURT

Is there anything you would like the Court to take into consideration?

☐ Attached is other pertinent documentation. List attached documents:

☐ The Court may decide on this application without a hearing unless a hearing is requested by you, the prosecutor's office, or the victim. (*Check the box below if you are requesting a hearing.*)

Hearing requested? ☐ **Yes** ☐ No

Case Number: _____

I understand that this application may be denied if information in this application is found to be inaccurate.

Under Oath I swear or affirm, under penalty of perjury, the information provided in this application is to the best of my knowledge true and correct.

Defendant's Name Printed

Defendant's Signature

Address

OR

To the best of my knowledge, the information provided in this application is true and correct.

Attorney's / Probation Officer's Name Printed

Attorney's / Probation Officer's Signature

Attorney's / Probation Officer's Address

AUTHORIZATION TO PROCEED ON BEHALF OF DEFENDANT

I authorize my Attorney or Probation Officer, _____ to petition
the Superior Court of Arizona in Maricopa County, to take the above-indicated action.

Date

Defendant's Signature