Tompkins County Sheriff's Office

779 Warren Road Ithaca, NY 14850

Derek R. Osborne Sheriff



TEL: (607) 257-1345 FAX: (607) 266-5436

> Jennifer K. Olin Undersheriff

Co-Registration Form

I,			, the undersigned hold a valid New York State Pistol Permit,		
number	, in		county.		
I give consent to have the	following	firearm(s) co-regist	ered to		,
who holds a valid New Yo	rk State Pis	tol Permit, numbe	r		
LIST ALL FIREARMS THAT	YOU WOUL	D LIKE TO CO-REG	<u>ISTER</u>		
MAKE		REV/AUTO	MODEL	CALIBER	SERIAL#
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
(use back of form to list ac	dditional w	eapons)			
Date	S	ignature			
Witness Signature					

^{**}As a Co-Registrant you are responsible to make sure that you report any disposals of the firearm same as if you are the primary owner of the firearm**

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Co-Registration of Firearms in Tompkins County

Complete the Tompkins County Sheriff's Office Co-Registration Form. The form can be completed at the Sheriff's Office with both the Pistol Owner and the Co-Registrant present. If both parties cannot be present at the Sheriff's Office, the Pistol Owner can have the document notarized and the Co-Registrant can then submit the form to the Sheriff's Office.

As a Co-Registrant you are responsible to make sure that you report any disposals of the firearm same as if you are the primary owner of the firearm