

FOID Application

ILLINOIS STATE POLICE INTEGRITY SERVICE PRIDE

Bruce Rauner, Governor

Agency Links

- About ISP
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ISP in Your Community

Police Officers' Memorial

ISP News

ISP District 2 Donates Gift Basket To Support Chicagoland Children Battling Brain Cancer
Elgin - The Illinois State Police District 2 Safety Education Unit today donated a gift basket for the Cancer Kiss My Cooley's 4th Annual Kiss it Gala Event taking place at 6:00pm on March 7, 2015 at The Seville in Streamwood, IL. The ISP gift basket included 2 ISP T-Shirts, a Heritage Foundation C ... [Full story](#)

ISP Troopers Brave the Cold to Volunteer at Winter Special Olympics
Released: February 11, 2015
Galena, IL - Illinois State Troopers joined the ranks of volunteers at this year's Illinois Winter ... [Full story](#)

Illinois State Police Investigate Officer Involved Shooting Next To Dan Ryan Expressway
Released: February 8, 2015
CHICAGO - Illinois State Police (ISP) officials are investigating a shooting that occurred near the ... [Full story](#)
[Click here for more ISP news](#)

Quick Reference

Services & Info
Select...

Important Phone Numbers
Select...

How Do I?
Select...

Forms
Select...

ISP Districts
Choose an ISP district or select a county to locate the ISP district headquarters in that area.
Select ISP district ... OR Select county ...
[View ISP District Map](#)
All ISP district headquarters are safe havens for newborns. Visit [Save Abandoned Babies Foundation](#) for information on the Safe Haven Law in Illinois.

ISP Investigations (Zones)
ISP special agents, in cooperation with federal and local police agencies, investigate such crimes as homicide, sexual assault, fraud and forgery.
Choose a zone office or select a county to locate the ISP investigations office servicing that area.
Select ISP Zone ... OR Select County ...

ISP Forensic Services
Forensic Sciences Labs ...

- [Forensic Science Laboratories Area Map](#)
- [Forensics Web](#)
- [Crime Scene Services Area Map](#)

Agency Features

- FIREARMS SERVICES
- FOID CONCEALED CARRY FFL PORTAL
- Sex Offender Information
- MISSING Illinois Sex Offenders
- Murderer and Violent Offender Against Youth Information
- Methamphetamine Manufacturer Information
- Crime Rate Uniform Crime Reporting
- CITIZEN SURVEY
- MEDICAID FRAUD
- State Features
- sunshine Illinois Accountability Project

IACP/Motorola Trooper of the Year Award
Trooper Brad Williams, Illinois State Police

Video provided courtesy of Motorola Solutions

Winter Road Conditions

State Links
Search this site [Go]
Search Illinois [Go]

Criminal Background Check Symposium

Fallen

ISP Memorial Park

Agencies Boards and Commissions
AMBER ALERT
MISSING & EXPLOITED CHILDREN
Inspector General

Firearms Services Bureau Home Page



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

Released October 9, 2014

- Home
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- CCL Information
- CCL Instructor Information
- Firearms Dealer
- Clear & Present Danger
- Firearm Transfers
- Gun Show Information
- Frequently Asked Questions
- Unlawful Use of Weapons
- Firearm Projectiles Prohibited & Sentences Imposed by Illinois
- Municipal Ordinances
- Live Scan Locations

We welcome feedback. Submit comments and suggestions to the [site administrator](#).

Firearms Services Bureau

FOID Card

The Firearm Owner's Identification (FOID) Card identifies a person as eligible to possess/acquire firearms and firearm ammunition as part of a public safety initiative in the State of Illinois.

Enter

[Learn More](#)

Concealed Carry License (CCL)

To carry a concealed firearm in the State of Illinois, state law requires an Illinois Concealed Carry License.

Enter

[Learn More](#)

Licensed Firearms Dealers

⚠️ Authorized Dealers only!

If you are a federally licensed dealer for the state of Illinois, click the Login button below to access the Dealer's portal.

Enter

Concealed Carry License Instructor Certification

You must be certified by the Illinois State Police to conduct Illinois concealed carry firearms training. To apply or check on your status, click Enter below:

Enter

[Learn More](#)

Concealed Carry License Objection Portal Access

⚠️ Law enforcement personnel only!

If you have access to the law enforcement objection portal for the purpose of reviewing Illinois submitted concealed carry applications, click the Login button below.

[Law Enforcement Login](#)

New User Registration



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

Released October 9, 2014

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Returning Applicants or Licensees Sign In

Notice: Our Sign In Requirements have changed!

The Illinois Digital ID is no longer valid on this site. [Register Now](#) for an Illinois State Police User ID.

New User?
[Register Now](#)

Secure Sign In

User ID

Password

Last name:

Date of Birth

By clicking the Sign In button below, you agree to our [Terms of Use](#).

Sign In

[Forgot Password](#)

Attention Current CCL Holders
Because Illinois Digital ID is no longer being used, CCL holders who obtained a CCL prior to March 16, 2015 will need to register as a new user before they can use Secure Sign In.

Note: After user registration has been completed, all future access will be obtained using Secure Sign In.

We welcome feedback. Submit comments and suggestions to the [site administrator](#).

User Registration- Step 1

User Registration Step 1 of 3

About You

Last name	Date of Birth
<input type="text"/>	<input type="text"/>

Account and Login Setup

User ID	<input type="text"/>
Email Address	<input type="text"/>
New Password	<input type="password"/>
Confirm Password	<input type="password"/>
Security Question 1:	<input type="text"/>
Answer - Security 1:	<input type="text"/>
Security Question 2:	<input type="text"/>
Answer - Security 2:	<input type="text"/>
Security Question 3:	<input type="text"/>
Answer - Security 3:	<input type="text"/>
Security Question 4:	<input type="text"/>
Answer - Security 4:	<input type="text"/>

Guidance

1. Create a User ID.
2. Enter your email address.
3. Create a password.
4. Select and answer four security questions.
5. Enter the security code to advance.

Enter the Security Code Displayed

	
<input type="text" value="Type the text"/>	Privacy & Terms
<input type="button" value="Cancel"/>	<input type="button" value="Next"/>

User Registration- Step 2

User Registration Step 2 of 3

About You

Proper Name

Last	First	Middle	Suffix	Maiden Last Name
<input type="text" value="Doe"/>	<input type="text" value="John"/>	<input type="text" value="T"/>	<input type="text" value=""/>	<input type="text" value=""/>

Date of Birth

Primary Phone #

Driver's License or State Identification

ID State	ID Type	ID Number
<input type="text" value="Iowa"/>	<input type="text" value="Driver's License"/>	<input type="text" value="D12345678965"/>

Weight as displayed on your Drivers License
 (This is used for verification purposes only)

Existing Firearm Owner's Identification Card (FOID)
Required: If have or have had an Illinois State FOID card, enter your FOID number below.
 Yes No Do you have or have you ever had a FOID card?

Guidance

1. Complete the remainder of your name.
2. Confirm your date of birth.
3. Add your primary telephone number.
4. Select ID state, ID type, and ID number.
5. Enter weight as displayed on State DL or ID card.
(Weight must match DL or ID card exactly.)
6. Indicate whether you have ever had a FOID card.
7. If applicable, enter existing/previous FOID card number
(Used to validate user if already in the system.)

Note: This box will appear after you select ID State.

User Registration- Step 3

User Registration Step 3 of 3

Your Registration Information

Name: Doe, Joseph
Driver's License: D12345678965
Date of Birth: 1/1/1960
FOID #: none

Personal Declaration and Signature

Under penalties of perjury, I do hereby solemnly affirm and attest that all information provided by myself in this registration are true and accurate.

After reading the declaration above, please enter your Password below and click the I Agree button below.

Password

Match Confirmation

Existing Record Identified as Yours

Joseph Doe
1234 Main St
CENTRALIA, IL 62801

Is this your information?

Guidance

1. If you selected "No FOID," you have completed the registration process and must re-enter your password to proceed to the FOID application pages.
2. If you selected "Yes FOID," and entered a FOID number, the name and address of that FOID card holder will appear in a popup "Match Confirmation" box.
3. You will see the name and address of a potential match.
4. If this is your information, select "Yes, same person." If this is not your information, select "No, not the same."
 - a. If "Yes" is selected, you will proceed to the application pages.
 - b. If "No" is selected, you will receive notice that your identity requires further action by the Illinois State Police.

Attention Out-of-State Residents

If you are not an Illinois resident, you may apply for a FOID card **ONLY** if either of the following conditions apply:

1. You are employed in Illinois and are required to carry a firearm in the course of your employment.

OR

2. You are an active duty military member and you are permanently stationed in Illinois.

FOID Application



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

janedoe1 [Sign Out](#)

To begin, enter preliminary information

Progress: 9%



Your State of Residence

Illinois

What are you applying for?

Firearm Owner's Identification Card (FOID)

Yes No Are you eligible for a military fee exemption?

Concealed Carry License

Guidance

1. Select state of residence.
2. Select FOID card only.
3. Answer yes or no to, "Are you eligible for a military fee exemption?"
 - a. If yes, military information will be required on the next page.
 - b. If no, and you are an out-of-state resident, employment information will be also be required.

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FOID Application- Military Fee Exemption (Illinois Resident)



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

Progress: 9%



To begin, enter preliminary information

Your State of Residence

Illinois

Note: Military members who are Illinois residents are required to upload a copy of their military ID.

What are you applying for?

Firearm Owner's Identification Card (FOID)

Yes No Are you eligible for a military fee exemption?

You must be an active duty member of the Armed Forces of the United States, a member of the Illinois National Guard, or a member of the Reserve Forces of the United States and a permanent resident of Illinois or be serving under with permanent station orders in Illinois to receive the exemption from the application fee.

Please upload your military identification below:

+ Add File...

Note: Allowed file types: PDF, JPG, PNG and GIF. Max file size: 5.0 MB

Concealed Carry License

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FOID Application- Military Fee Exemption (**Out-of State Resident**)



Now, let's collect your address information

Progress: 9%

Military Base

Military Base Address

Street

Apt/Bldg #

Country

Zip/Postal Code

State

City/Town

County

You must be an active duty member of the Armed Forces of the United States, a member of the Illinois National Guard, or a member of the Reserve Forces of the United States and a permanent resident of Illinois or be serving under with permanent station orders in Illinois to receive the exemption from the application fee. Please **upload your military identification and permanent station orders** below:

+ Add File...

Note: Allowed file types: PDF, JPG, PNG and GIF. Max file size: 5.0 MB

You must download, complete and upload the following [Out of State document](#).

+ Add File...

Note: Allowed file types: PDF, JPG, PNG and GIF. Max file size: 5.0 MB

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Note: Military members who are out-of-state residents must upload a copy of their military ID, permanent station orders, and an out-of-state affidavit.

FOID Application – Employment Purposes (**Out-of State Resident**)



Now, let's collect your address information

Progress: 9%

Employer's Name

Employer's Address

Street

Apt/Bldg #

Country

Zip/Postal Code

State

City/Town

County

For out-of-state residents applying for a FOID card, an authorized representative of your employer must sign the [Employment Requirement Certification](#) document, affirming your employment as law enforcement or as an armed security officer.

Please upload the completed and signed document below:

+ Add File...

Note: Allowed file types: PDF, JPG, PNG and GIF. Max file size: 5.0 MB

You must download, complete and upload the following [Out of State document](#).

+ Add File...

Note: Allowed file types: PDF, JPG, PNG and GIF. Max file size: 5.0 MB

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Note: Out-of-state residents who require a FOID card for employment purposes must upload both of the following documents:

1. Employment Requirement Certification Document
2. Out-of-State Affidavit

FOID Application



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FIREARMS SERVICES BUREAU

janedoe1 [Sign Out](#)

Before we begin, please agree to the following:

Progress: 18%



Firearm Owner's Identification Card Warning: This application is governed by the Firearm Owner's Identification (FOID) Card Act and must be completed by the applicant or his/her parent or legal guardian in its entirety, or it will be denied. **Entering false information on an application for a FOID Card is punishable as a Class 2 felony in accordance with Section 14(d-5) of the FOID Card Act.** This application and the information contained herein may be provided to third parties with whom the Illinois State Police (ISP) has contracted in order to complete the processing of my FOID card application. In such cases, however, the ISP requires the companies acting on our behalf abide by all state and federal laws and our privacy policies and institute safeguards to protect the confidentiality of your information.

I agree to the terms above

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FOID Application



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FIREARMS SERVICES BUREAU

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Now, we'll collect some preliminary questions

Progress: 27%



Date of Birth

August 4 1967

Note: Confirm your date of birth. This information cannot be changed, as it corresponds to the information you provided during user registration.

Save

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FOID Application



Now, we'll collect identification numbers

Progress: 36%



Please enter the last 4-digits of your Social Security Number:

Yes No Are you a US Citizen?

Note: If you are not a US Citizen, you are required to provide additional information on the next screen.

Yes No Do you have a valid Driver's License or Identification Card?

You must have a valid and active driver's license or state identification to submit an application for a FOID and/or concealed carry license.

Save

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FOLD Application (Non-US Citizens)



Now, we'll collect identification numbers

Progress: 36%



Please enter the last 4-digits of your Social Security Number:

Yes No Are you a US Citizen?

Country of Citizenship:

Enter your Alien Registration Number (ARN) or I-94 Number and Exception Document Type below:

ARN I-94

Yes No Do you have a valid Driver's License or Identification Card?

ID State

ID Type

ID Number

Save

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FOID Application



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FIREARMS SERVICES BUREAU

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Next, verify & complete the following information

Progress: 45%



Proper Name

Last	First	Middle	Suffix	Maiden Last Name
<input type="text" value="Doe"/>	<input type="text" value="Jane"/>	<input type="text" value="E"/>	<input type="text" value=""/>	<input type="text" value=""/>

List all Previous Names

Last	First	Middle	Suffix
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

[+ Add Previous Name](#)

Place of Birth

Country	State
<input type="text" value="United States of America (USA)"/>	<input type="text" value=""/>

Personal Information

Gender	Race		
<input type="text" value="Female"/>	<input type="text" value="White"/>		
Height	Weight	Hair Color	Eye Color
<input type="text" value="5' 6"/>	<input type="text" value="160"/>	<input type="text" value="Brown"/>	<input type="text" value="Brown"/>

Contact Information

Type	Phone Number	Primary Phone	Email (required for e-notifications)
<input type="text" value="Cell"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="janedoe1@noreply.com"/>
			Confirm Email: (required for e-notifications)
			<input type="text" value=""/>

[+ Add Phone](#)

Save

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FOID Application



Now, let's collect your address information

Progress: 55%

Current Address **Note: Your physical address is required for the application.**

Street Address	Apt/Bldg #	Country	
<input type="text" value="123 Main St"/>	<input type="text"/>	<input type="text" value="United States Of America (USA)"/>	
Zip/Postal Code	State	City/Town	County
<input type="text" value="60714"/>	<input type="text" value="Illinois"/>	<input type="text" value="Niles"/>	<input type="text" value="Cook"/>

Mailing Address (Same as Current Address)

Note: If your mailing address is different than your current address, please uncheck the box and add your mailing address.

Street/POBox/Rural Route	Apt/Bldg #	Country	
<input type="text"/>	<input type="text"/>	<input type="text" value="United States Of America (USA)"/>	
Zip/Postal Code	State	City/Town	County
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Save

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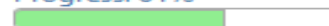
Next

FOID Application



Next, we'll ask Criminal History questions

Progress: 64%



- Yes No Have you ever been convicted of a felony under the laws of this or any other jurisdiction?
- Yes No Within the past 5 years (preceding the date of this application), have you been convicted of a battery, assault, aggravated assault, violation of an order of protection, or a substantially similar offense in which a firearm was used or possessed?
- Yes No Have you ever been convicted of domestic battery (felony or misdemeanor), aggravated domestic battery or a substantially similar offense?
- Yes No Have you ever been adjudicated a delinquent minor for the commission of an offense that if committed by an adult would be a felony?
- Yes No Are you currently the subject of an existing Order of Protection or No Contact/No Stalking Order?
- Yes No Within the previous year, have you failed a drug test for a drug for which you did not have a prescription?
- Yes No Within the past year (preceding the date of this application), have you used or been addicted to any controlled substance or narcotics in violation of state or federal law?
- Yes No Are you a medical marijuana patient registry card holder?
- Yes No Within the past 5 years (preceding the date of this application), have you been a patient in a mental institution or any part of a medical facility for the treatment of mental illness?
- Yes No Have you ever been adjudicated by a court as a mental defective or ordered by a court, board or authorized entity to an in-patient or out-patient mental health?
- Yes No Are you intellectually or developmentally disabled?
- Yes No Are you an alien who is unlawfully present in the United States under the laws of the United States?
- Yes No Have you been admitted to the United States under a non-immigrant visa of the Immigration and Nationality Act?
- Yes No Have you ever renounced your citizenship as a citizen of the United States?
- Yes No Have you ever been discharged from the Armed Forces under dishonorable conditions?
- Yes No Are you a fugitive from justice?

Save

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FOID Application



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

janedoe1 [Sign Out](#)

Next, upload your Photo

Progress: 82%



Photo Requirements:

Photo Required

+ Add Photo...

- Full color photo of a good likeness of you, no digital alterations
- Photo must be taken within the last thirty (30) days
- Facial view from shoulders up, properly centered and in focus
- Eyes open, mouth closed, neutral expression
- Background must be a light solid color
- No hats, sunglasses or other accessories that obscure your face

If your photo does not meet these requirements, your application will be delayed and you will be required to resubmit.

Accepted file types: JPG, PNG, and GIF. Max file size: 5.0 MB

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FOID Application



Please electronically sign and make payment

Progress: 91%

Signature Certification: I have personally completed this Firearm Owner's Identification Card Application. By electronically signing this application, I authorize the Illinois State Police to verify my answers and affirmatively request that any person or government or private entity authorized to hold records relevant to this application, including but not limited to those pertaining to my citizenship, criminal history and mental health treatment or history, to release such records or confirm information therein to the Illinois State Police. Under penalties of perjury, I certify I have examined all the information provided for my application or renewal and, to the best of my knowledge, it is true, correct, and complete.

Warning: Entering false information on an application for a Firearm Owner's Identification Card is punishable as a Class 2 felony in accordance with subsection (d-5) of Section 14 of the Firearm Owner's Identification Card Act.

After reading the declaration above, please enter your Password and click SIGN AND PAY to complete and make payment.

Login Id: **janedoe1**

Password:

Sign & Pay

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FOID Application (Payment Processing, Page 1 of 3)

ILLINOIS STATE POLICE FIREARMS SERVICES BUREAU

Billing Information

Please enter your Billing Instructions here

Billing Contact

Billing Address

CONTINUE →

Payment Information

Review & Submit



PAYMENTS GATEWAY
PCI Certified Secure

FOID Application (Payment Processing, Page 2 of 3)

Billing Information

 EDIT

Billing Contact

Jane Doe
janedoe1@noreply.com
555-555-5555

Billing Address

123 Main St
Niles
IL 60714

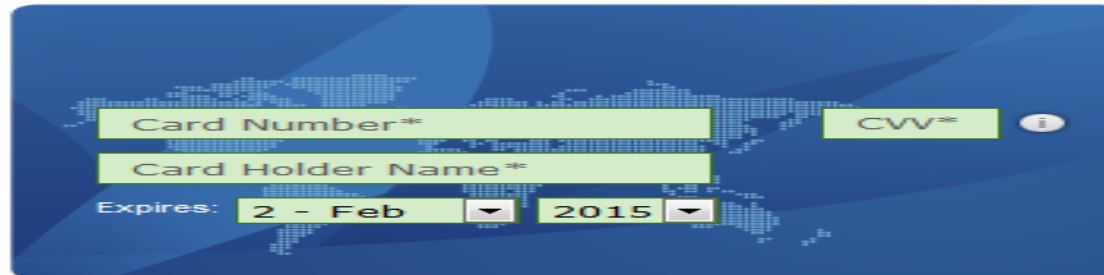
Payment Information

Please enter your Payment Instructions here

Credit Card

Electronic Check

Please fill in the green fields below



Card Number* CVV* ⓘ

Card Holder Name*

Expires: 2 - Feb 2015

**Note: Service fees will be applied.
(Credit Card= 2.35%, Electronic Check= \$1.00)**

Single payment





Payment Amount: 10.00

Total: 10.00

CONTINUE →

FOID Application (Payment Processing, Page 3 of 3)

ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

Billing Information		 EDIT
Billing Contact Jane Doe janedoe1@noreply.com 555-555-5555	Billing Address 123 Main St Niles IL 60714	
Payment Information		 EDIT
 *****1111	Payment Amount: \$10.00	
Review & Submit		
<input checked="" type="checkbox"/> I authorize my account to be charged in accordance to the following Terms and Conditions for the payment(s) indicated above.		
<p style="text-align: center;">SUBMIT PAYMENT</p>		
		

FOID Application



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

Your Application has been successfully submitted

Thank you for using the online portal for submitting your FOID application. The Illinois State Police will process your application within 30 days pending all information is accurate and meets state requirements.

Applicant:

Date Submitted: 2/12/2015

Amount: \$10.00

Payment Confirmation: **d32df9de-642c-4e88-8fa2-7caea742fc02**

Note: We will notify you via the email address you provided about status changes or to request additional information.

Print

[home](#)

Note: Print this receipt for FOID payment and click "home" to access your application summary/home page.

FOID Application



ILLINOIS STATE POLICE
FIREARMS SERVICES BUREAU

janedoe1

[Sign Out](#)

Created 2/12/2015

Application Summary

Doe Jane E
123 Main St
Niles, IL 60714
Cook County

[Phone:](#) 555-555-5555
[Email:](#) janedoe1@noreply.com
[Fingerprint TCN:](#) Not specified

Note: Your FOID application is complete. Please click "sign out" to log out of your account.

Your Firearm Owner's Identification Card

Status	Expiration	Number
Under Review	n/a	1510055731
Renew	Order Replacement	

Note: Using secure sign in, you may login to your application dashboard at any time to check the status of your application.

Your Concealed Carry License

Status	Expiration	Number
Not on File	n/a	Pending
Apply	Order Replacement	

Your Instructor Certification

Status	Expiration	CCT ID
Not on File	n/a	Pending