



Request for Release of Firearm Superior Police

Full name of person requesting release: First – Middle – Last	
Birthdate of person requesting firearm:	
Address of requestor:	
Phone number of requestor:	
Description of firearm(s) requested to be released:	
Date firearm(s) seized:	Incident # (if known)
<p>If your firearm was seized as evidence YOU must obtain a release from the prosecutor handling the case for release of the firearm. (District Attorney or City Attorney)</p> <p>Firearm(s) seized as under Chapter 51 of the Wisconsin statutes require a court order for release. A copy of the court order MUST be attached to this request, and the original signed court order must be brought at the time the requestor claims the firearm(s).</p>	
<p>You must submit a copy of your driver's license/state I.D. with this form. After you submit this form you will be contacted regarding the request, once it has been processed. If your request is approved, you must bring photo identification with you at the time you claim the firearm.</p> <p style="text-align: center;">You should bring a legal case to carry the firearm in.</p>	
Requester Notified Date: _____	
Release authorized <input type="checkbox"/> Yes <input type="checkbox"/> No	

POLICE DEPARTMENT USE ONLY			
TIME system Firearms Return Query	<input type="checkbox"/> Clear	<input type="checkbox"/> Restricted	
Initials/date: _____			
Court Order required	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is court order attached and valid: _____	
Police Supervisor Approving/Denying	(circle one)	Release Date: _____	
Property Officer releasing firearm:	Date: _____		
Positive ID of person checked	<input type="checkbox"/>	Court order checked	<input type="checkbox"/> Yes <input type="checkbox"/> N/A