

**HAWAII POLICE DEPARTMENT
APPLICANT'S WAIVER OF LIABILITY AND RELEASE FORM
FOR APPLICATION FOR LICENSE TO CARRY FIREARMS AND WEAPONS**

In order to permit the Hawai'i Police Department, hereafter referred to as the "Department," to make a thorough investigation of my background, family, personal habits, and reputation for the purpose of determining my fitness and suitability for a License to Carry a Firearm in the County of Hawai'i:

I, _____, applicant, hereby release from liability and promise to hold harmless from any liability under any and all possible causes of legal action any and all persons that shall furnish any information or opinions regarding applicant's background, family, personal habits or reputation in order to determine whether applicant is able to meet the qualifications to carry a firearm in the County of Hawai'i.

The undersigned hereby authorizes any person or legal entity who may be contacted by Department officers, employees, or agents to release and transmit to such officers, employees, or agents, any information, data, or opinions they may have regarding my background, family, personal habits or reputation. Further, the undersigned waives for this purpose any and all legal privileges I may have to maintain such information as confidential, including but not limited to the following privileges: attorney-client, clergyman-penitent, husband-wife, physician-patient, psychologist-client, creditor-customer, and accountant-client.

The undersigned further agrees to hold harmless and release from liability under any and all possible causes of legal action the Department, its officers, its employees, and its agents, for any statements, acts, or omissions in the course of its investigation into applicant's background, family, personal habits, and reputation.

I further realize that it is necessary for the Department to thoroughly investigate all aspects of applicant's personal background and qualifications and, by applying for a License to Carry a Firearm in the County of Hawai'i, I expressly waive all of my legal rights and causes of action to the extent that the Hawai'i Police Department investigation (for purposes of evaluating my suitability or application to carry a firearm) may violate or infringe upon these aforementioned legal rights and causes of action. I hereby authorize the Department to reproduce this form to be used solely for the purposes of my Application for a License to Carry a Firearm in the County of Hawai'i.

This release from liability given by the undersigned to the Department, its officers, employees, agents, and all others as heretofore provided, shall apply to any right of action that might accrue to the undersigned, my heirs, and personal representatives.

Subscribed and Sworn to before me this _____ day of _____, _____.

(Print & Sign)
Notary Public, _____ Circuit
State of _____
My commission expires _____

Applicant's Signature
Dated: _____

NOTARY CERTIFICATION

Doc. Date: _____

No. of Pages: 2

Notary Name: _____

Third Judicial Circuit

Doc Description: Hawai'i County Police Department Applicant's
Waiver of Liability and Release Form for License to Carry Firearms or
Weapons of: _____

Notary Signature

Date