



NEBRASKA STATE PATROL

Report of Injury/Damage Caused by Firearm of Concealed Handgun Permit Holder

Title 272, Nebraska Administrative Code, Chapter 21, Section 020.01 requires any injury to a person or damage to property resulting from the discharge of a handgun carried by a concealed handgun permit holder must be reported by the permit holder to the Nebraska State Patrol within ten (10) days of the incident.

1. Permit Holder Information

Full Name:		Date of Birth:
Permit Number:	Nebraska Driver's License Number/State ID Number/Active Military ID Number:	
Current Residential Address: (Street, City, County, State, ZIP)		
Mailing Address: (if different) (Street, City, County, State, ZIP)		
Cell Phone:	Home Phone:	Email Address:

2. Incident Information

Date of Discharge:	Place of Discharge: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Other: _____
Address of Discharge: (Street, City, County, State, ZIP)	
Make/Model/Caliber of Weapon Discharged:	Serial Number of Weapon Discharged:
Injuries Caused by Discharge:	
Property Damage Caused by Discharge: (Not required for minor property damage of minimal significance)	
Investigating Agency: (if reported)	
Brief Narrative of Incident:	
Signature:	Date:

Please submit a copy of this form to:

**Nebraska State Patrol
Criminal Identification Division
Attn: Concealed Handgun Permit
3800 NW 12th Street
Lincoln, NE 68521
Fax: (402) 479-4321
Email: nsp.chp@nebraska.gov**