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.

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

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.

Concealed Carry License Objection Portal Access
**Law enforcement personnel only!**
If you have access to the law enforcement objection portal for the purpose of processing Illinois submitted concealed law enforcement objection, click the Login button below.
New User Registration

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The Illinois Digital ID is no longer valid on this site.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.
User Registration - Step 1

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.

Guidance
User Registration - Step 2

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

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.
To begin, enter preliminary information

Your State of Residence
Illinois

What are you applying for?

- Firearm Owner’s Identification Card (FOID)
- Concealed Carry License

Are you eligible for a military fee exemption?

- Yes  - No

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 also be required.
Note: Military members who are Illinois residents are required to upload a copy of their military ID.
FOID Application - Military Fee Exemption (Out-of-State Resident)

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)

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
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
Now, we'll collect some preliminary questions

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.
FOID Application

Now, we'll collect identification numbers

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  Previous  Next
Now, we’ll collect identification numbers

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

Are you a US Citizen?
☐ Yes ☐ No

Country of Citizenship:

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

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

ID State: Illinois
ID Type: Driver’s License
ID Number: D12345678999

Save  Previous  Next
## FOID Application

Now, let's collect your address information

### Current Address
- **Street Address**: 123 Main St
- **Zip/Postal Code**: 60714
- **State**: Illinois
- **Country**: United States Of America (USA)

### Mailing Address
- **Same as Current Address**: [ ]
- **Street/POBox/Rural Route**: 
- **Zip/Postal Code**: 

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

**Note:** If your mailing address is different than your current address, please uncheck the box and add your mailing address.
Next, we’ll ask Criminal History questions

- 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 your 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 ever been charged or charged 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?
Next, upload your Photo

Photo Requirements:

- 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
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:
Billing Information

Please enter your Billing Instructions here

Billing Contact

Jane
janedoe1@noreply.com
555-555-5555

Billing Address

123 Main St
60714
Niles

CONTINUE

Payment Information

Review & Submit
Note: Service fees will be applied.
(Credit Card= 2.35%, Electronic Check= $1.00)
Billing Information

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

Billing Address
123 Main St
Niles
IL 60714

Payment Information

Visa
************1111

Payment Amount: $10.00

Review & Submit

I authorize my account to be charged in accordance to the following Terms and Conditions for the payment(s) indicated above.

SUBMIT PAYMENT
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: [Redacted]
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.

Note: Print this receipt for FOID payment and click “home” to access your application summary/home page.
Note: Your FOID application is complete. Please click “sign out” to log out of your account.

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