



Firearms Safety Verification

I/We _____ certify that I/we:

Do not keep firearms in our home

We have _____ (Enter number) firearms in our home.

They are stored in _____ (locked safe/locked box, etc.)

in _____. (area of home/room).

They are unloaded and are inaccessible to children.

COMMENTS:

Prospective Foster/Adoptive Parent

Prospective Foster/Adoptive Parent

Date: _____

Date: _____