

CONCEALED PISTOL LICENSE CHEMICAL TEST RIGHTS

AUTHORITY: MCL 28.425k; COMPLIANCE: Voluntary.

I. Incident Information

Incident Number	Agency	Date
Suspect's Name	Date of Birth (Month/Day/Year)	
Address		
Concealed Pistol License (CPL) Number	County Issuing CPL License	

II. Officer's Statement to CPL Licensee

Note to Officer: Read the below statement to the CPL licensee suspected of carrying a concealed pistol or a portable device that uses electro-muscular disruption technology while under the influence of alcoholic liquor or a controlled substance, or with any bodily alcohol content:

I am a peace officer. I have probable cause to believe that you are carrying a concealed pistol or a portable device that uses electro-muscular disruption technology while under the influence of alcoholic liquor or a controlled substance or while having a bodily alcohol content in violation of the Firearms Act, MCL 28.425K.

Your acceptance of a Michigan license to carry a concealed pistol constitutes implied consent to submit to a chemical analysis of your breath, blood, or urine at my request.

Chemical Test Rights

I am requesting you submit to a chemical test to determine if you are under the influence of alcoholic liquor or a controlled substance, or have an unlawful bodily alcohol content.

You may refuse to submit to a chemical analysis, but if you do, all of the following apply:

1. I may obtain a court order requiring you to submit to a chemical analysis.
2. The refusal will result in your license to carry a concealed pistol being suspended for 6 months.

If you submit to a chemical analysis, you may obtain a chemical test of your breath, blood, or urine from a person of your own choosing. You will be given a reasonable opportunity for such a test. You are responsible for obtaining a chemical analysis of a test sample taken by a person of your own choosing.

III. Chemical Test Results

The CPL licensee identified in section I has been informed of his/her chemical test rights regarding carrying a concealed pistol or a portable device that uses electro-muscular disruption technology in the state of Michigan and has:

Agreed to take the requested chemical test. Test Results: _____

Refused to take the requested chemical test.

IV. Officer's Information

Officer's Name	Date	Time
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Note to Officer: In the event of a refusal, the Officer shall promptly report the refusal to the MSP by forwarding a copy of the form to the MSP via email at MSPCPL@michigan.gov, or by mail to the Michigan State Police CPL Unit, P.O. Box 30634, Lansing, MI 48909-0634.