

## CONCEALED PISTOL LICENSE CHEMICAL TEST RIGHTS

<b>I. Incident Information</b>		
Incident Number	Agency	Date
Suspect's Name		Date of Birth (Month/Day/Year)
Address	Court of Jurisdiction	
Concealed Pistol License (CPL) Number	County Issuing CPL	
<b>II. Officer's Statement to CPL Licensee</b>		
<b>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:</b>		
<p>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.</p>		
<b>Chemical Test Rights</b>		
<p>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.</p>		
<p>You may refuse to submit to a chemical analysis, but if you do, all of the following apply:</p>		
<ol style="list-style-type: none"><li>1. I may obtain a court order requiring you to submit to a chemical analysis.</li><li>2. The refusal will result in your license to carry a concealed pistol being suspended for 6 months.</li></ol>		
<p>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.</p>		
<b>III. Chemical Test Results</b>		
<p>The CPL licensee identified in section I has been informed of their 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:</p>		
<p><input type="checkbox"/> Agreed to take the requested chemical test. Test Results:</p>		
<p><input type="checkbox"/> Refused to take the requested chemical test.</p>		
<b>IV. Officer's Information</b>		
Officer's Name	Date	Time
<b>Note to Officer:</b> 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 <a href="mailto:MSPCPL@michigan.gov">MSPCPL@michigan.gov</a> , or by mail to the		
<p>Michigan State Police CPL Unit PO Box 30634 Lansing, MI 48909-0634.</p>		