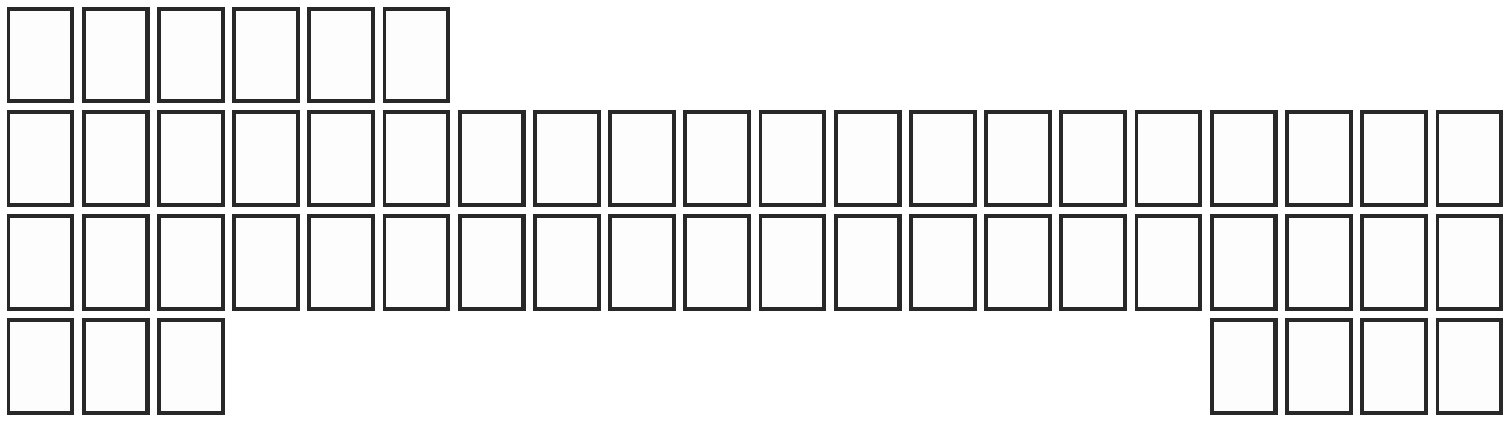
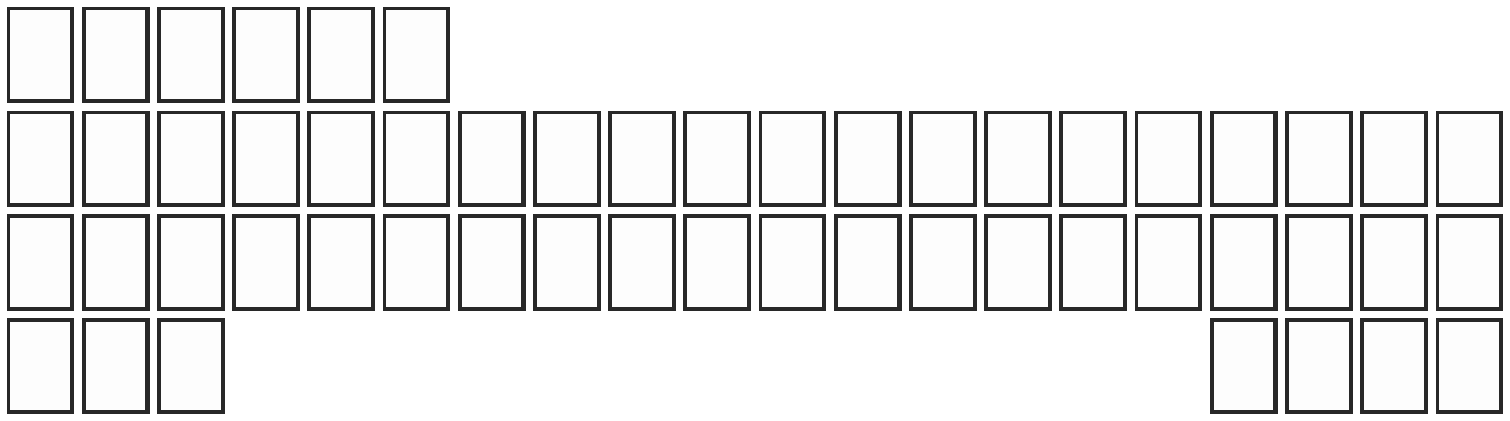
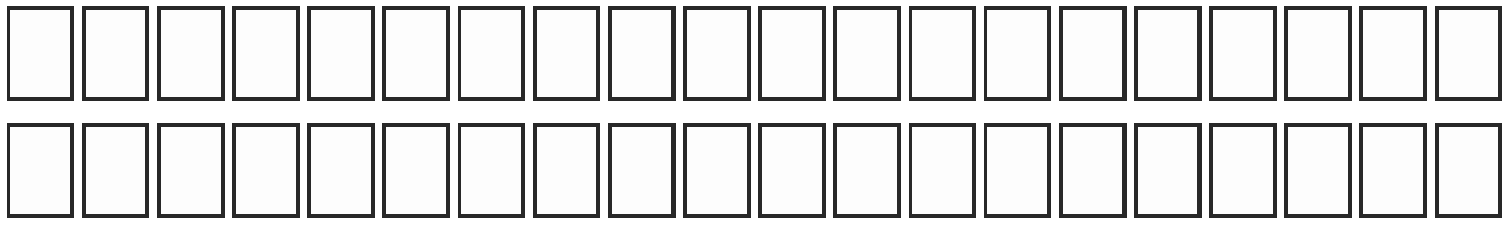
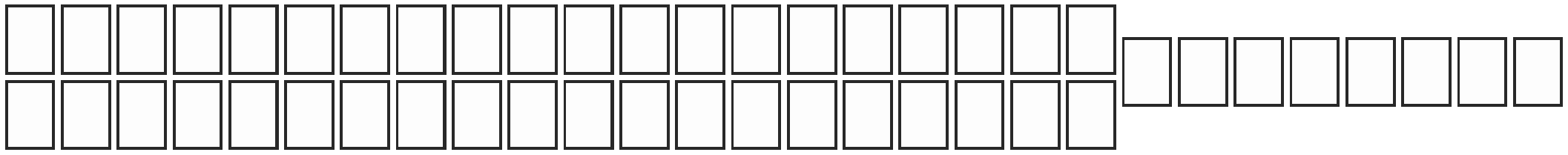
**FIREARM PERMIT APPLICATION**



Australian Capital Territory

Firearms Registry

**ADULT FIREARMS LICENCE APPLICATION**

You are required to provide 100 points of identity with your application for a

new licence under this Act.

**1. APPLICANT DETAILS *Please Use***

***BLOCK LETTERS in dark pen only.***

To be completed by The applicant for this Licence.

Family Name

ACT Firearms Act 1996 - Part 9 and 10

**ACT Firearms Registry**

**Use Only**

**Licence Number:**

You are required to provide 100 points of identity with your application for a new licence under this Act.

**1. APPLICANT DETAILS *Please Use BLOCK LETTERS in dark pen only.***

**The applicant to complete.**

**1.1 APPLICANT DETAILS**

Surname

Given Name(s)

Date of Birth

dd mm yyyy

**1.2** Have you been known by any other names?

If yes, please provide details:

Yes No

Previous Surname

Previous Given Name(s)

**1.3 RESIDENTIAL DETAILS**

Street Number

Street Name

Suburb

State

**1.4 POSTAL ADDRESS** (if different from above)

Post Code

Street Number

Street Name

Suburb

State

Post Code

**1.5 CONTACT DETAILS**

Home Work

Mobile Fax

E-mail

**2. PERMIT DETAILS**

**The applicant to**

**complete.**

This information is required to support your genuine reason. **Genuine Reasons** (See the Genuine

Reason Guide for further

details:

Display,

Firearm Modification

-Shortening or

Conversion,

Permit to Acquire.

**2.1** What is your ACT firearms licence Number?

**2.2** What category of firearms are you currently authorised to possess?

A B C D H

**2.3** What is your reason for requesting a permit?

**2.4** Are you applying for a permit to acquire a firearm? Yes No

**2.5** Are you applying for a display permit? Yes No

If yes, go to 2.7

If yes, go to 2.6



**2. PERMIT DETAILS (continued)**

**FIREARM PERMIT APPLICATION**

ACT Firearms Act 1996 - Part 9 and 10

**The applicant to complete.**

**2.6 FIREARM DISPLAY DETAILS (Only complete this part if your are applying for a display permit)**

If yes, what type of display are you

If there is insufficient

space to complete a

applying for?

Permanent

Temporary

Wall

question, please provide additional details at the end of this application.

How many firearms do you wish to display?

If you wish to display 2 firearms, are they a matched pair? Yes No

How will you display the firearm(s)?

**All applicants to complete**

**Only complete**

**Firearm 2 details if**

**2.7 FIREARM DETAILS (All applicants to complete this part)**

Have you ever been refused a firearm(s) permit?

Have you ever had a firearm(s) permit cancelled or suspended?

Yes No

Yes No

**the display will contain a matched pair of firearms.**

If you answered yes to either of the previous two questions, please provide the reason(s) why.

**Applicants may only**

**apply for a single firearm for a Permit to Acquire per application.**

**If you are applying for a category B, C, or H firearm of the same**

**2.8** Select the category of firearm(s) related to this permit?

A B C H D

**2.9** Does this permit relate to any prohibited firearms?

**Category D requires Ministerial approval**

Yes No

**calibre to one you already possess, please provide additional details as**

**to your genuine need.**

**2.10** Complete the following details in relation to this permit:

**Firearm 1**

What is the Type/Action of the firearm?

**Firearm 2**

What is the Type/Action of the firearm?

What is the Make of the firearm?

What is the Make of the firearm?

**If the firearm is a**

**replica, please detail the colour instead of the calibre in the calibre field.**

**Complete details of the display must be provided including method of display, materials used for cabinets and location with in the premises.**

What is the Model of the firearm?

What is the Calibre of the firearm?

Barrel Length

What is the Serial Number of the firearm?

What is the Model of the firearm?

What is the Calibre of the firearm?

Barrel Length

What is the Serial Number of the firearm?



**2. PERMIT DETAILS (continued)**

**FIREARM PERMIT APPLICATION**

ACT Firearms Act 1996 - Part 9 and 10

**The applicant to**

**Complete.**

If there is insufficient space to complete a question, please provide additional details at the end of this application.

**2.11 PREVIOUS OWNER DETAILS (Enter Dealer Details if purchased from a licence Firearms Dealer, than go to 2.13)**

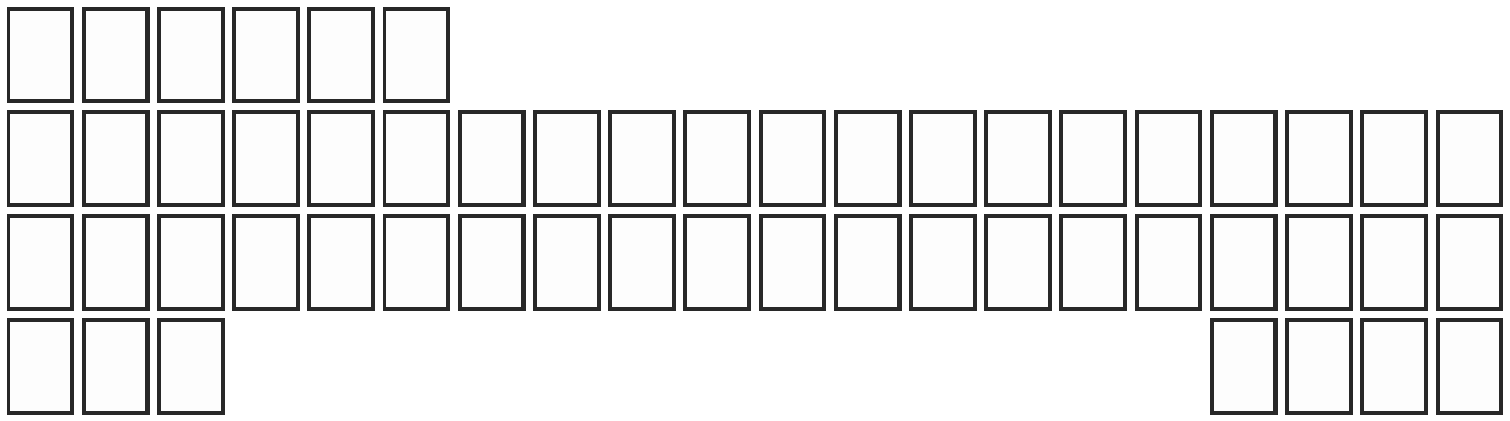
Previous owner’s name?

Previous owner’s firearm licence number?

Previous owner’s address?

**2.12 DEALER DETAILS (Dealer details to be used during acquisition, enter “As Above” if purchased from a Dealer)**

Dealer’s name?



Dealer’s firearm licence number?

**2.13** What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s)

and/or ammunition?

Street Number

Street Name

Suburb

State Post Code

**3. PERSONAL HISTORY**

**The applicant to**

**Complete.**

This information is used to assess your suitability for a firearms licence.

If there is insufficient space to complete a question, please provide additional details at the

end of this application.

**3.1** Do you have any physical and/or mental disability which may render you unfit

to use or be in possession of a firearm? If yes, please provide details:

**3.2** Have you ever suffered or received treatment for any of the following:

Yes No

Mental and or emotional illness?

Yes No

Excessive alcohol consumption?

Yes No

Illicit drug use or dependence?

Yes No

Fits, blackouts or dizziness? Serious head injuries?

Any other condition not previously mentioned?

Yes No

Yes No

Yes No

If you answered yes to any of 3.2, please provide details:

**3.3** Have you in the last 10 years been convicted of an offence?

If yes please provide details:

Yes No



**3. PERSONAL HISTORY (Continued)**

**FIREARM PERMIT APPLICATION**

ACT Firearms Act 1996 - Part 9 and 10

**The applicant to**

**Complete.**

This information is used to assess your suitability for a firearms licence.

**3.4** Have you in the last 10 years entered into a recognisance to keep the peace or to be of good behaviour?

If yes please provide details:

Yes No

If there is insufficient space to complete a question, please provide additional details at the end of this application.

**3.5** Are you an Australian citizen?

**3.6** If no, when did you arrive in Australia?

**3.7** What is your country of birth?

Yes No

dd mm yyyy

If yes, go to 4.1

**3.8** Are you a permanent resident of Australia?

Yes No

**3.9** Are you in Australia on a Visa?

**3.10** What type of Visa do you hold?

**3.11** What is the expiry date of your Visa?

Yes No

dd mm yyyy

If no, go to 3.14

**3.12** Have you ever been refused a Visa?

If yes please provide details:

Yes No

**3.13** Have you ever been refused entry into or deported from Australia?

If yes please provide details:

Yes No

**3.14** Do you have a passport?

If yes, what is the passport number?

What is the country of issue?

Yes No

If no, go to 3.15

**3.15** Do you have a firearms licence issued by another country?

If yes, what is the firearms licence number? What is the country of issue?

Yes No

If no, go to 4.1

**FIREARM PERMIT APPLICATION**



ACT Firearms Act 1996 - Part 9 and 10

**4. APPLICANT DECLARATION**

**The applicant to complete.**

**4.1 APPLICANT DECLARATION**

DECLARATION

I declare that the answers I have given on this application are true and correct to the best of my knowledge.

I understand that it is an offence to deliberately make a false or misleading statement. I agree to abide by the ACT Firearms Act 1996. I also consent to Police making any enquiries necessary to assess this application.

Signature of person making the declaration

dd mm yyyy

**ADDITIONAL INFORMATION**

**.............................................................................................................................................................................**

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**.............................................................................................................................................................................**

Australian Capital Territory

Firearms Registry

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**FIREARM PERMIT APPLICATION**



Australian Capital Territory

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Family Name

ACT Firearms Act 1996 - Part 9 and 10

**ACT Firearms Registry Use Only.**

**Receipt Number**

**Date of Application**

**Amount $**

**Receipt**

**Date**

dd mm yyyy

dd mm yyyy

**ID Verification**

**Permit Conditions**

ID Type

ACT Firearms Licence

Drivers Licence

Passport

Primary ID Number

Secondary ID

APPROVED

NOT APPROVED

Signature of Approving Officer

**Approval Date**

**Permit Issue Date**

dd mm yyyy

Printed Name and Badge Number

dd mm yyyy

**Permit Expiry Date**

dd mm yyyy

**Permit Issuer**

Signature of Issuing Officer

**Permit Receiver**

Signature of Receiver

Printed Name and Badge Number

Printed Name

dd mm yyyy

Applicant

Agent

Permit / Permit to Acquire

Number

dd mm yyyy

AFP 3011 (1/09)

AF2009-10 Approved by Commander Bruce Hill, ACT Firearms Registrar on 7 September 2009 under s271 of the *ACT Firearms Act 1996*Pg 6 of 6