

ACT Firearms Act 1996 - Part 9 and 10

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

1. APPLICANT D	ETAILS Please Use BLOCK LETTERS in dark pen only.				
The applicant to complete.	1.1 APPLICANT DETAILS				
complete.	Surname				
	Given Name(s)				
	1.2 Have you been known by any other names? Yes No If yes, please provide details: Yes No				
	Previous Surname				
	Previous Given Name(s)				
	1.3 RESIDENTIAL DETAILS				
	Street Number				
	Street Name				
	Suburb				
	State Post Code				
	1.4 POSTAL ADDRESS (if different from above)				
	Street Number				
	Street Name				
	Suburb				
	State Post Code				
	1.5 CONTACT DETAILS				
	E-mail				
2. PERMIT DETA					
The applicant to complete.	2.1 What is your ACT firearms licence Number?				
This information is required to support your genuine reason.	2.2 What category of firearms are you currently authorised to possess?				
Genuine Reasons (See the Genuine	2.3 What is your reason for requesting a permit?				
Reason Guide for further details:					
●Display,					
• Firearm Modification -Shortening or	2.4 Are you applying for a permit to acquire a firearm? Yes No If yes, go to 2.7				
Conversion,	2.5 Are you applying for a display permit? Yes No If yes, go to 2.6				
 Permit to Acquire. 					

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 Authorised by the ACT Parliamentary Counsel—also accessible at www.legislation.act.gov.au



ACT Firearms Act 1996 - Part 9 and 10

2. PERMIT DETA	ILS (continued)					
The applicant to complete.	2.6 FIREARM DISPLAY DETAILS (Only complete this part if your are applying for a display permit)					
If there is insufficient space to complete a question, please provide additional details at the end of this application.	If yes, what type of display are you applying for? Peri How many firearms do you wish to display? If you wish to display 2 firearms, are they a ma How will you display the firearm(s)?	manent Temporary Wall atched pair? Yes No				
All applicants to complete	2.7 FIREARM DETAILS (All applicants to complete this Have you ever been refused a firearm(s) permi	t? Yes No				
Only complete Firearm 2 details if the display will contain a matched pair of firearms.	Have you ever had a firearm(s) permit cancelle If you answered yes to either of the previous two qu					
Applicants may only apply for a single firearm for a Permit to Acquire per application.	2.8 Select the category of firearm(s) related to this	category D requires Ministerial approval				
If you are applying for a category B, C, or H firearm of the same calibre to one you already possess, please provide	2.9 Does this permit relate to any prohibited firearm2.10 Complete the following details in relation to thisFirearm 1					
additional details as to your genuine need.	What is the Type/Action of the firearm? What is the Make of the firearm?	What is the Type/Action 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.	What is the Model of the firearm?	What is the Model of the firearm?				
	What is the Calibre of the firearm?	What is the Calibre of the firearm?				
Complete details of the display must be provided including method of display, materials used for cabinets and location	Barrel Length What is the Serial Number of the firearm?	Barrel Length What is the Serial Number of the firearm?				
with in the premises.						

L



ACT Firearms Act 1996 - Part 9 and 10

2. **PERMIT DETAILS** (continued) The applicant to 2.11 PREVIOUS OWNER DETAILS (Enter Dealer Details if purchased from a licence Firearms Dealer, than go to 2.13) Complete. Previous owner's name? If there is insufficient space to complete a Previous owner's firearm licence number? question, please provide additional details at the Previous owner's address? end of this application. 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 Post Code State PERSONAL HISTORY

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.

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.

Mental and or emotional illness?	Y	'es	No		
Excessive alcohol consumption?	٢	′es 🗌	No		
Illicit drug use or dependence?	Y	′es 🗌			
Fits, blackouts or dizziness?	Y	′es 🗌			
Serious head injuries?	Y	′es 🗌			
Any other condition not previously	mentioned?	es 🗌	No		
you answered yes to any of 3.2, ple	ase provide details:				

Yes

No



ACT Firearms Act 1996 - Part 9 and 10

3. PERSONAL HISTORY (Continued)

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.

3.4 Have you in the last 10 years entered into a recognisance to keep the peace or to be of good behaviour? Yes No
If yes please provide details:
3.5 Are you an Australian citizen? Yes No If yes, go to 4.1
3.6 If no, when did you arrive in Australia?
3.7 What is your country of birth?
3.8 Are you a permanent resident of Australia? Yes No
3.9 Are you in Australia on a Visa? Yes No If no, go to 3.14
3.10 What type of Visa do you hold?
3.11 What is the expiry date of your Visa?
3.12 Have you ever been refused a Visa? Yes No
If yes please provide details:
3.13 Have you ever been refused entry into or deported from Australia? Yes No
_If yes please provide details:
3.14 Do you have a passport? Yes No If no, go to 3.15
If yes, what is the passport number?
What is the country of issue?
3.15 Do you have a firearms licence issued by another country? Yes No If no, go to 4.1
If yes, what is the firearms licence number?
What is the country of issue?



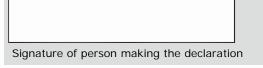
ACT Firearms Act 1996 - Part 9 and 10

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.



dd	mm	уууу	

ADDITIONAL INFORMATION



ACT Firearms Act 1996 - Part 9 and 10

		ACT Firearms I	Registry Us	se Only.	
Receipt Number		Amou		Receipt Date	
Date of Application	dd mm yyy	уу			dd mm yyyy
ID Verification				Permit Co	nditions
ID Type ACT Firearm Primary ID Number Secondary ID	s Licence Driver	s Licence Passpo	rt 🗌		
			NOT APPROVEE		
Signature of Approving Officer Approval Da		ate	Permit Issue D	dd mm yyyy	
Printed Name and Badge Number dd mm		уууу	Permit Expiry I		
Permit Issuer			Permit Re	eceiver	
Signature o	f Issuing Officer			Signature of Receiver	
Printed Nam	ne and Badge Number			Printed Name	
do	d mm yyyy]		Applicant	Agent
Permit / Permit to Acquire Number			dd mm	уууу	