PROHIBITED WEAPON & ARTICLE PERMIT

ACT Prohibited Weapons Act 1996 - Part 3

ACT Firearms Registry
GPO Box 401, Canberra ACT 2601
Phone: 02 62567777 Fax: 02 62567758
Email: actfirearmsregistry@afp.gov.au

PERMIT NUMBER:
PXXXX

Blue Original - Applicant (Returned to the registry within 7 days of the cancellation/ expiry date).
Grey Duplicate - Registry
White Duplicate - Book

APPLICANT DETAILS

Firearms licence number (If applicable)

Surname

Given Name(s)

Date of Birth
dd mm yyyy

PERMIT ADDRESS

Street Number

Street Name

Suburb

State

Post Code

Reason for Permit
(Skrike out which is not applicable).

Possession Possession & Use Display

Item(s) Details

Item Description (Including quantities & serial numbers if applicable)

Permit Conditions

THIS PERMIT IS ISSUED FOR THE REASON AND ITEM(S) LISTED ABOVE ONLY

(Subject to the permit conditions)

Signature of Approving Officer

APPROVED NOT APPROVED

Permit Issue Date
dd mm yyyy

Printed Name and Badge Number

Approval Date
dd mm yyyy

Permit Expiry Date
dd mm yyyy

 AF2009-101 Approved by Commander Bruce Hill, ACT Firearms Registrar on 7 September 2009 under s18 of the *ACT Prohibited Weapons Act 1996*

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