



DELIVERY/SURRENDER OF FIREARM/WEAPON/ARTICLE

ACT Firearms Act 1996/ACT Prohibited Weapons Act 1997

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

NUMBER:
AXXXXX

Blue Original - Owner/Possessor
Green Duplicate - ACT Firearms Registry
Pink Duplicate - ACT Firearms Registry
White Duplicate - Book

POSSESSOR DETAILS

Surname
Given Name(s)

Date of Birth

dd mm yyyy

RESIDENTIAL ADDRESS

Street Number
Street Name
Suburb
State Post Code

CONTACT DETAILS

Home
Work
Mobile
E-mail

LICENCE/ID DETAILS

Licence type ACT Firearms Licence Drivers Licence Other (specify) ID number

FIREARM DETAILS

Type/Action Make Model
Calibre/Common Name Serial number Barrel Length (mm)
Pistols only

AMMUNITION/ACCESSORIES

Sling Bag Magazine Scope Bolt Stock Barrel Other

Complete the following details for Ammunition, Magazine, Scope, Bolt, Barrel & Other accessories

Make Model Quantity
Calibre/Common Name Serial number Barrel Length (mm)
Pistols only

Surrendered/Seized Firearm/Weapon/Article

Unconditional Surrender Seizure Amnesty Surrender Compensation Surrender Value (\$)
Reason for Seizure

I hereby surrender the item(s) detailed above, to the ACT Firearms Registrar. I will not make any future claim for return of the item(s).

Signature of Owner/Possessor
(Not required for seizures)

Printed Name

Date of Surrender

dd mm yyyy

Signature of Receiver

Printed Name/Badge Number

Date of Surrender/Seizure

dd mm yyyy

Entered onto Promis? Yes No

ALL FIREARMS/WEAPONS/ARTICLES MUST BE ENTERED ONTO PROMIS

THIS FORM IS NOT TO BE USED FOR MPR'S OR EXHIBIT CONTROL



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Date of Surrender/Seizure

dd mm yyyy

Entered onto Promis? Yes No

MOVEMENT

Date	Signature	Badge Number	Destination
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

FINAL DISPOSAL

Signature of Receiver
Name & Address
Date
Signature of Witness
Badge Number Date



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Instructions for Use

1. Use ball point pen only.
2. Not to be used for Exhibits or Miscellaneous Property.
3. Full name and address of person to be included.
4. Full and complete description of Firearm/Weapon or Article and accessories to be entered.
5. Receiving Member to sign appropriate section prior to removal of the Blue Original.
6. Cancellation of the form is to be annotated clearly between two parallel lines. Signed by the member completing the form and stating the reason for cancellation. **Do Not Remove Any Cancelled Pages - ACT Firearms Registry will remove on collection of the completed book.**
7. The Firearm/Weapon/Article must be tagged with an exhibit tag bearing the Form ID number.
8. Any loose accessories should also be tagged with the same Form ID number.
9. Only remove the Blue Original form and issue it to the Deliverer.
10. If the Firearm/Weapon/Article is returned to the owner, complete the Final Disposal section on the rear of the Pink Duplicate and return to the ACT Firearms Registry.
11. **Ammunition and Firearms must be packaged separately.**

Distribution

- Blue Original - Owner/Possessor
Green Duplicate - ACT Firearms Registry
Pink Duplicate - ACT Firearms Registry
White Duplicate - Remain in Book

Type Index

- CO - Combination Under and Over
CS - Combination Side by Side
PI - Pistol
RE - Revolver
RI - Rifle
SB - Spare Barrel
SH - Single Barrel Shotgun
SS - Side by Side Double Barrel Shotgun
UO - Under Over Double Barrel Shotgun
XX - Other

Action Index

- AR - Air Rifle
BA - Bolt Action
BB - Break Barrel
BP - Black Powder
II - Inoperable Post 1991
IN - Inoperable Pre 1992
LE - Lever Action
PU - Pump Action
RB - Rolling Block
RE - Revolving Cylinder
SL - Self Loading
AU - Automatic
XX - Other