

SAFER COMMUNITIES

Firearms Act 2015 & Firearms Regulations 2017

OFFICIAL: Sensitive

IS LICENCE

AFL PD303

APPLICATION for a FIREARMS LICENCE (INCLUDES FIREARMS COLLECTORS LICENCE)



PENALTIES may apply for FALSE STATEMEN				No			cence s Use								_ L		nce i											
INDIVIDUAL APPLI	CAN'	Тο	r N	ION	IIN	==																						
Tick Relevant Box																												
Surname																												
First Name	П	Т	1		1	T	1			,	Mi	ddle	Nar	ne(s)	1							1		_				
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Residential Address																			Post	code	=							
Postal Address (If different)												Postcode																
Talankana Nissakana	Home							Date	of B	sirth										;	Sex							
Telephone Numbers	Mobile				Occupation																							
Email Address																												
Have you ever changed your name? No Yes If yes, provide details below																												
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Method of changing your nan		M	1arria	ige			Re	putatio	า																			
Method of changing your name Deed Poll Marriage Reputation THIS SECTION MUST ALSO BE COMPLETED IF APPLYING FOR A COMPANY FIREARMS LICENCE																												
COMPANY DETAIL	.S																											
Company Name																												
Trading Name			<u> </u>			<u> </u>		<u> </u>												<u> </u>								
Business Address Postcode																												
Postal Address												Postcode																
Contact Details								Email																				
Type of Business														ABN														
	Family Name											Gi	ven	Name(s)														
Details of a person																												
Nominating a Company Nominee	Signat							No	min	ators Ti	tle							Date										
																									/		1	
APPLICANT REQU	IIREN	IEN	NTS	3 – I	Ref	fer	to	ро	lice	e.sa	a.gc	ov.a	au	for tl	ne r	eq	ui	re	d c	ok	cu	m	en	ts	/ 6	evic	der	ıce
Are you an Australian citizen; A permanent resident in Aust] Y	es		No		If yes, provide evidence as per the internet instructions. If no, do not proceed.														
Are you usually a resident in	Are you usually a resident in South Australia?											No		If yes						a	s pe	er t	he	inte	erne	et instructions.		
Do you have a physical or mental illness, condition or disorder which may render you unfit to hold a firearms licence?										es		No		If yes, provide details.														
Have you ever been refused renewal or had a firearms lice	а			es		No		If yes, provide details including licen						nce	nce numbers.													
Do you hold a firearms licence from any other jurisdiction?										es		No If yes, provide licence details and any registration in SA.						any	y firearms for									
Do you satisfy the criteria and meet the standards of a fit and proper person?										es		No		Refer for the					pag	je d	or Se	ect	ion	7 F	irea	rms	Act	2015
Police.sa.gov.au/services-and	Police.sa.gov.au/services-and-events/firearms-and-weapons/Firearms Licence Eligibility																											
IMPORTANT NOTII	FICAT	[[0	NS	_ 1	lor	n-R	efu	ınc	lab	le /	Арр	lic	<u>ati</u>	ons														
Refer to TAFE SA for the Enconsiderations is not refunda	glish lan														ourse	. In	abili	ty t	о ра	arti	cipa	te	or p	ass	s du	e to	lang	guage
If you are still subject to the re		ns of	f a pr	reviou	ıs ca	ance	llatio	n, y	ou w	ill no	t be g	grant	ted o	or reinst	ated	with	n a l	ice	nce.	. Th	ne a	ppli	icati	ion	is n	ot re	func	dable.
If you do not satisfy the Registrar you are a fit and proper person, a citizen or permanent resident or usually resident in SA the application will be refused and is not refundable.																												

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CATEGORIES APPLIED FOR (Please tick required categories)													
					Lic	ence	Categ	ory					
Firearm Category	1 - Shooting Club	2 - Target Shooting	3 - Hunting	4 - Paintball Shooting	5 - Primary Production	6 - Security Guard	7 - Contract Shooter	8 - Commercial Range	9 - Shooting Gallery	10 - Collector	11 - Dealer Employee	12 - Miscellaneous	Category 11 (Dealer) licence to be applied for on RF1637. Where appropriate, please forward any required justification or documentation with this application. For miscellaneous, provide details, including if for imitation only.
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Firearm type per category													
Air gun, paint-ball firearms, rim fire rifles (not self-loading), shotgun (not self-loading or pump action), break action combination shotguns and rim fire rifles.													
Muzzle loading firearms (not handguns), revolving chamber rifles, centre fire rifles (not self-loading), multiple barrel centre fire rifles that are not designed to hold additional rounds in a magazine; break action combination shotguns and rifles, all other firearms (not being prescribed, handguns, self-loading firearms or pump action shotguns) that are not category A firearms.													
c Self-loading rim fire rifles having a magazine capacity of 10 rounds or less, self-loading or pump action shotguns having a magazine capacity of 5 rounds or less.													
Self-loading rim fire rifles having a magazine capacity of more than 10 rounds, self-loading centre fire rifles, self-loading or pump action shotguns having a magazine capacity of more than 5 rounds.													
H All Handguns (not being prescribed)													
P Prescribed Firearm as per section 5 and regulation 7													
Z Ammunition only													
Address where firearm(s) is to be secured: Principal residence / business address Other address													
Other Licensee(s) at address (licence number only): My security will be: (fick appropriate)													
My security will be: (tick appropriate) Steel safe with 2mm thick walls and door attached to building (unless over 150kg) with CCTV / alarm (delete as applicable)													
Steel safe with 3mm thick walls and door attached to building (unless over 150kg) with CCTV / alarm (delete as applicable)													
Strongroom with CCTV and alarm													
Steel safe complying with the requirements of schedule 1, clause 10(3)(b), 10(7), 11(3)(b), 11(7), 16(2), 16(7), 17(2), 17(4) or 17(9) of the Firearms Regulations, 2017													
Other	as app	roved	by Re	egistra	r (mus	t provi	de det	tails)					
							APPI	LICA	TION	FEE	IS N	ION	REFUNDABLE
DECLA									41-1-	!: .	-4:	1	was and assessed
i nereby	I hereby declare that all particulars given by me in this application are true and correct.												
(Signature of Applicant) (Date)													
MUST ATTEND LOCAL POLICE STATION WITH 100 POINTS OF IDENTITY													
LOCAL POLICE STATION USE ONLY													
Proof of identity, age and address produced (100 point system MUST be met) – Copies must be attached													
POLICE RECOMMENDATION: Recommended Not Recommended (Attach brief report)													
Firearms	s Lice	ence	Appl	icatio	on Fe	e:	\$						eipt No.:
	F	POL	ICE										re:
		Print Name: Rank/Class: STATION ID No.: Date:											
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		- 1/1										RMS	BRANCH (130)