



APPLICATION for a FIREARMS LICENCE
(INCLUDES FIREARMS PERMIT & FIREARMS COLLECTORS LICENCE)

HEAVY PENALTIES are provided for FALSE STATEMENTS

Licence / Permit No.

INDIVIDUAL APPLICANT or NOMINEE

TICK RELEVANT BOX

- FIREARMS LICENCE
- COLLECTOR'S LICENCE
- FIREARMS PERMIT

Surname

First Name

Middle Name(s)

Home Address

POSTCODE

Rural Property Addr.

POSTCODE

Postal Address

POSTCODE

Telephone Numbers	Home	<input style="width: 200px;" type="text"/>	Date of Birth	/ /	Sex	<input style="width: 50px;" type="text"/>
	Mobile	<input style="width: 200px;" type="text"/>	Occupation	<input style="width: 300px;" type="text"/>		

Email Address

Have you ever Changed your name? No Yes If yes, State Name Change(s) / Alias(es)

Family Name Given Name(s)

Method of changing your name Deed Poll Marriage Reputation

COMPANY DETAILS

ONLY COMPLETE THIS SECTION IF APPLYING FOR A COMPANY FIREARMS LICENCE

<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>
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Company A.B.N.

Company Name

Trading Name

Company Address

POSTCODE

Postal Address

POSTCODE

Contact Numbers	Phone	<input style="width: 250px;" type="text"/>	Fax	<input style="width: 150px;" type="text"/>
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Type of Business

Details of a person Nominating a Company Nominee	Family Name	<input style="width: 700px;" type="text"/>		
	Given Name(s)	<input style="width: 700px;" type="text"/>		
	Signature of Nominator	Nominators Title	Date	
		<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>	/ /

APPLICANT or NOMINEE SUPPORTING DETAILS

Can you read and understand English? Yes No (if no, state nationality)

Have you ever been refused a Firearms Licence or Licence Renewal, or had a Licence Cancelled? No Yes, give details

Do you have any physical or mental instability which may render you unfit to use or be in possession of a Firearm? No Yes, give details

Have you ever appeared before a Court of Law, Panel or other Judicial Body of any kind charged with any offence? Exclude any minor traffic matters. No Yes, give details

During the last three years, have you resided outside the state of South Australia? No Yes, give details

Do you hold any other Licence(s) under the Firearms Act or in any other State or Territory? No Yes, Quote Licence No's

Are you a Primary Producer or employed by a person who is? No Yes, give details

CLASS(ES) APPLIED FOR

NOTE: WHERE APPROPRIATE, PLEASE FORWARD ANY REQUIRED JUSTIFICATION OR DOCUMENTATION WITH THIS APPLICATION

Note: If Firearms Collectors Licence, Tick Licence Class area Only

***PURPOSE OF USE - TICK**

(OTHER, GIVE DETAILS, Including if for IMITATION ONLY)

CLASS	TICK	TYPE OF FIREARM PER CLASS	1	2	3	4	5	6	7
A		Air rifles, air guns, paintball firearms; .22 rimfire rifles (not self loading); single and double barrel shotguns (not self loading or pump action)							
B		Muzzle loading firearms (not handguns); revolving chamber rifles; centrefire rifles (not being self loading); break action shotgun/rifle combinations							
C		Self loading rimfire rifles (10 rounds or less), self loading and pump action shotguns (5 rounds or less)							
D		All other self loading rimfire and centrefire rifles, self loading and pump action shotguns not already mentioned							
H		All handguns including air pistols							

***PURPOSE OF USE:** 1. CLUB USE 2. TARGET SHOOTING (NOT CLUB USE) 3. HUNTING 4. PAINT BALL
5. PRIMARY PRODUCTION 6. SECURITY INDUSTRY 7. OTHER APPROVED BY REGISTRAR

Intended location and security arrangements

(Address)

(Type of Security)

DECLARATION: I HEREBY DECLARE THAT ALL PARTICULARS GIVEN BY ME IN THIS APPLICATION ARE TRUE AND CORRECT.

Signature of Applicant: Date: / /

SUBMIT APPLICATION AT YOUR LOCAL POLICE STATION WITH 100 POINTS OF ID

LOCAL POLICE STATION USE ONLY

Proof of identity, age and address produced (100 point system **MUST** be met) - **MUST** list:

Driver's Licence Number: Origin:

Passport Number: Origin:

Birth or Aust. Citizenship Certificate: Origin:

Other:

LOCAL POLICE RECOMMENDATION:

Recommended Not Recommended (Attach brief report)



SAPOL Employee's Signature:

Print Name: Rank/Class:

ID No.: Date: / /

Police Station Code:

FORWARD TO FIREARMS BRANCH (130)