

FIREARM LICENSING AUTHORITY

Application Form for Firearm Licences, Certificates and Permits



Form To Be Completed In Duplicate in Applicant's Own Handwriting

Section A

| | | |
|---|------------------------------|---|
| Application Type New Recertification | | Applicant should attach one (1) copy of their photograph here (Glue and Staple) |
| Type of Firearm Licence being applied for: | | |
| Firearm User's Licence Firearm User's (Employee 's) Certificate | | |
| Firearm User's (Special) Permit | | |
| Applicant Name – Surname then Christian Names Mr. Mrs. Ms. | | |
| Other names known as (including Professional names) | | |
| Date of Birth | Age at next birthday | Gender Male Female |
| Nationality | Marital Status | Applicant's Telephone No. |
| No. of children | Next of Kin and Relationship | Next of Kin's Contact No. |

Section B

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|--|------------------------|
| Birth Certificate Reference No. | Drivers Licence No. |
| Nationality of Passport | Passport Reference No. |
| National I.D No. | Tax Registration No. |
| Tax Compliance Certificate(s) No(s) & Period Covered | |

Section C

| | | | | |
|------------------------------------|---------|--------|-----------|---------------------|
| Present Address of Residence | Country | Parish | City/Town | Period of Residence |
| | | | | |
| Previous Address of Residence | Country | Parish | City/Town | Period of Residence |
| | | | | |
| Next Previous Address of Residence | Country | Parish | City/Town | Period of Residence |
| | | | | |

Section D

| Name and Address of Present Business/Employer | Date/Time Period | Nature of Business/Employment |
|---|------------------|-------------------------------|
| | | |

| Name and Address of Previous Business/Employer | Date/Time Period | Nature of Business/Employment |
|--|------------------|-------------------------------|
| | | |

| Name and Address of Next Previous Business/Employer | Date/Time Period | Nature of Business/Employment |
|---|------------------|-------------------------------|
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Section E

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|---|-----|----|
| Do you hold dual Citizenship | Yes | No |
| If yes, state the countries for which you hold citizenship | | |
| Do you hold a Landed Immigration Status for any country? | Yes | No |
| If yes, state Country | | |
| Have you travelled abroad in the last ten (10) years | Yes | No |
| If yes, list all countries visited | | |
| | | |
| Have you ever lived or worked abroad | Yes | No |
| If yes state period(s), Name of organisation(s), location(s) and nature of employment in the space below. | | |
| | | |
| If yes, state address of last residence in the space below | | |
| | | |

Section F

| Educational Background, Qualifications or Skills |
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Section G

List any non-political Social Organisations that you are currently a member of including location, contact number and period of membership (e.g. Church, Civic Groups, Gun Clubs etc.).

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Section H

| Name of References | Occupation | Address of References | Telephone No |
|--------------------|------------|-----------------------|--------------|
| | | | |

Section H2

| Name of Medical Facility from which the Medical Certificate was obtained | Name of Examining Physician | Address of Medical Facility | Telephone No. of Medical Facility |
|--|-----------------------------|-----------------------------|-----------------------------------|
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Section I**To Be Completed by Persons Applying for a Firearm Employee Users Certificate**

| Name of Employer | Address | Telephone No. | Private Security Regulation Authority I.D. Card No |
|------------------|---------|---------------|--|
| | | | |

To be completed by persons Applying for Firearm Permit

| Name of Firearm Holder in Relation to whose firearm(s) the Permit is being sought | Address | Telephone No. | Make, Type, Calibre and Serial No. of Firearm(s) |
|---|---------|---------------|--|
| | | | |

Section J

| Nearest Police Station to Place of Residence | Nearest Police Station to Place of Business/Employment |
|--|--|
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Section K

State Type and Calibre of Firearm (s) for which the Licence, Certificate or Permit is being applied

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Section L

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| Have you ever applied for a Firearm Licence, Certificate or Permit? Yes No |
| What was the result? |
| Has any Firearm Licence, Certificate or Permit previously issued to you been revoked? Yes No |
| Has any previous Firearm issued to you been lost stolen |
| Have you ever been convicted of a criminal offence locally or abroad? Yes No |
| If yes give details |
| Do you object to being fingerprinted as part of a background security check? Yes No |
| Are you willing to sign an Investigation Release Form authorising persons interviewed, as part of a background security check, to release the required information? Yes No |

Section M

| Are you presently the holder of a Firearm Licence, Certificate or Permit? Yes No | | | | |
|---|-----------------------------|----------------------|-----------------|---------------|
| If yes, complete the section below. N.B. For Private Security Companies, Gun Clubs etc., if additional space is required then list separately, sign and attach to Application Form. | | | | |
| Type of Licence | Firearm Make, Type, Calibre | Serial No of Firearm | Parish of Issue | Date of Issue |
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|-------------------------------------|
| State your reason(s)for application |
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| I attest to the truth of statements made and acknowledge acceptance that any statement given if found to be inaccurate or untrue as a result of further investigations may militate against the grant of a Firearm Licence, Certificate or Permit |
| Applicant's Signature _____ Date _____ |

| For Official Use Only | |
|------------------------------------|---|
| Date Submitted: | Application Reference No: |
| Method of Submission: | Fee Paid: |
| Date of Interview: | Date submitted for security clearance: |
| Interviewing Officer: | Date Security Report Received: |
| Signature of Interviewing Officer: | Date Submitted to Investigation Branch: |

Application Procedures

The applicant is required to sign the bottom right hand corner of each page of the Application Form signifying his/her agreement with the information supplied on the form.

The form contains four pages, Section A to M, kindly ensure that all pages are submitted along with the supporting documents.