



SOUTH AFRICAN POLICE SERVICE

**APPLICATION FOR A DUPLICATE LICENCE, PERMIT, CERTIFICATION OR AUTHORIZATION FOR LOST, STOLEN AND DEFACED LICENCES**

[Section 29(2), 44(2), 58(2), 72(2) and 82(2) of Firearms Control Act, 2000 (Act No 60 of 2000)]

OFFICIAL DATE STAMP
DATE RECEIVED

<b>A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED</b>									
1 Application reference no									

<b>B. FOR OFFICIAL USE BY POLICE STATION WHERE APPLICATION IS RECEIVED</b>			
1 Province			
2 Area			
3 Police station			
4 Component code			
5 Firearm applications register reference no	SAPS.86	NO	YEAR

**C. PARTICULARS OF LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**  
TYPE OF LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION (Indicate with X)

1	Competency certificate	2.9	Licence to possess firearm for business purposes, Other business purposes
1.1	To trade in firearms	2.10	To provide security services for its own business
1.2	To manufacture firearms	3	Licence issued to particular categories of persons
1.3	To conduct business as a gunsmith	3.1	Licence to deal in firearms and ammunition
1.4	To possess a firearm	3.2	Licence to manufacture firearms and ammunition
2	Licences	3.3	Licence to conduct business as a gunsmith
2.1	Licence to possess firearm for self-defence	4	Permits
2.2	Licence to possess restricted firearm for self-defence	4.1	Permit to possess ammunition in a private collection
2.3	Licence to possess firearm for security officer purposes	4.2	Permit to possess ammunition in a public collection
2.4	Licence to possess firearm for occasional hunting and sports-shooting	4.3	Import permit
2.5	Licence to possess firearm for dedicated hunting and dedicated sports-shooting	4.4	Export permit
2.6	Licence to possess firearm in a private collection	4.5	Transporter's permit
2.7	Licence to possess a firearm, in a public collection (museums)	4.6	In-transit permit
2.8	Licence to possess firearm for business purposes, Business in hunting	4.7	Multiple import and export permit

continue

SAPS Application for duplicate

5	Authorizations	6.4	To conduct business in hunting
5.1	Temporary authorization to possess a firearm	6.5	To provide security services for its own business
5.2	Temporary authorization to trade in firearms and ammunition	6.6	As a sports shooting and hunting association
5.3	Temporary authorization to a manufacturer to display firearms and ammunition	6.7	As a collector association
5.4	Temporary authorization to conduct business as a gunsmith	6.8	As a museum
6	Accreditations	6.9	As a public collector of firearms and ammunition
6.1	For a shooting range where public collectors may discharge firearms	6.10	As a game hunter
6.2	For a shooting range where an unrestricted amount of ammunition may be bought and fired	6.11	As an official institution
6.3	To provide training	6.12	For such business purposes as the Registrar may determine

7	State reason for the application for a duplicate licence (Indicate with X)			
7.1	Other reason	Lost	Stolen	Defaced

8	Particulars of original licence, permit, authorization or certificate		
8.1	8.2	8.3	8.4
	8.1	8.2	8.3
	8.1	8.2	8.3
	8.1	8.2	8.3
	8.1	8.2	8.3

9	Did you report the loss of your licence, permit, certificate or authorization within 24 hours at your nearest police station?		
9.1	YES	NO	If no, submit reason why the loss of your licence, permit, certificate or authorization was not reported
9.2	Reason		
9.3	If yes, submit the following details		
9.4	Police station where the loss/theft of you licence, permit, certificate or authorization was reported		
9.5	Notification reference number		

10 PARTICULARS OF FIREARM  
In case of a licence or temporary authorization to possess a firearm, the following particulars must be submitted

10.1	10.2	10.3	10.4	(1)	(2)	(3)	(4)
Type	Calibre	Make	Model				

Firearm component type:

10.5	Barrel serial number				
10.6	Frame serial number				
10.7	Receiver serial number				

**D. PARTICULARS OF THE HOLDER OF THE LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**

**1 NATURAL PERSON'S DETAILS**

1.1	SA Identity	Passport	
1.2	Identity number of natural person		
1.3	Passport number of natural person		
1.4	Surname	1.5 Initials	
1.6	Residential address		1.7 Code
1.8	Postal address		1.9 Code
1.10	Telephone number	1.11 Home ( )	1.12 Work ( )
1.13	Cell phone number	1.14 Fax ( )	
1.15	E-mail address		

**2 JURISTIC PERSON'S DETAILS**

**2.1 OTHER BODIES**

2.2	Registered company name		
2.3	Trading as name		
2.4	FAR number		
2.5	Postal address		2.6 Code
2.7	Business address		2.8 Code
2.9	Business telephone number	2.10 Work ( )	2.11 Fax ( )
2.12	E-mail address		

**3 RESPONSIBLE PERSON'S DETAILS**

3.1	Responsible person (full name and surname)		
3.2	Type of identification (indicate with X)	SA Identity	Passport number
3.3	Identity number of responsible person		
3.4	Passport number of responsible person		
3.5	Cell phone number		
3.6	Physical address		3.7 Code

SAPS Application for duplicate

3.8 Postal address

3.9 Code

**CERTIFICATE BY PERSON WHO IS IN LAWFUL POSSESSION OF THE FIREARM(S)**

I hereby declare that the above firearm(s) is/are legally in my possession and that I propose to sell or supply it to the applicant once the necessary licence(s) has/have been obtained and that the particulars of the firearm(s) are correct and accurate

If I make any false statement on this form I shall be guilty of an offence in terms of Section 120 (9)(f) of the Firearms Control Act, 2000 (Act No 60 of 2000)

4.1 Name and surname of current owner/authorized person

4.2 Identification number of current owner/authorized person

4.3 Designation

4.4 Date C C Y Y - M M - D D

4.5 Signature of current owner/authorized person

4.6 Place

E. SIGNATURE OF APPLICANT (Sign only where applicable)

Signature

1 \_\_\_\_\_

PHOTO

2

3

4 Name of applicant in block letters

5 Date C C Y Y - M M - D D

6 Place

**PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION**

7.1 Name of police official in block letters

7.2 Persal number of police official

7.3 Rank of police official

7.4 Signature of police official

**8 PARTICULARS OF WITNESS**

8.1   
Name of witness in block letters

8.2   
Persal number of witness

8.3   
Rank of witness

8.4   
Signature of witness

**F. PARTICULARS OF INTERPRETER**  
(This section must only be completed if the applicant cannot read or write, or understand this document)

1	Name and surname of interpreter													
2	Identity/Passport number of interpreter													
3	Residential address										4 Code			
5	Postal address										6 Code			
7	Telephone number		8 Home ( )		9 Work ( )									
10	Cell phone number		11 Fax ( )											
12	E-mail address													
13	Translated from (language)						to							

14 Date  C  C  Y  Y - M  M - D  D

15   
Signature of interpreter

16   
Place

17   
Rank of police official

18   
Persal number of police official

**G. IN CASE OF NOMINEE/AUTHORIZED PERSON**

1	Name and surname of interpreter																					
2	Identity/Passport number of nominee/authorized person																					
3	Date		C		C		Y		Y		-		M		M		-		D		D	
4	Signature of nominee/authorized person																					
5	Place																					

**H. FOR OFFICIAL USE BY THE POLICE STATION**

1   
Name of police official in block letters

2 Date  C  C  Y  Y - M  M - D  D

3   
Rank of police official

4   
Place

5   
Signature of police official

6   
Persal number of police official

**INSTRUCTIONS: APPLICATION FOR A TEMPORARY AUTHORIZATION TO TRADE IN FIREARMS AND AMMUNITION, TO CONDUCT BUSINESS AS A GUNSMITH OR TO DISPLAY FIREARMS AND AMMUNITION ON PREMISES OTHER THAN THOSE SPECIFIED FOR DEALERS, MANUFACTURERS AND GUNSMITHS**

**GENERAL INSTRUCTIONS**

- An application for a licence to possess a firearm must be completed in indelible black ink.
- Section H of this application form must be completed by the Designated Firearms Officer.
- Section C of this application form must be completed by the Central Firearms Register.
- Sections D and E of this application form must be completed by the applicant.
- Section F of this application must be completed by the interpreter if an interpreter was used.
- Section G of this application form must be completed by a nominee/authorized person if a nominee/authorized person was used.
- A person is guilty of an offence in terms of the Firearms Control Act, 60 of 2000, if he/she furnishes false information on this application form.

**SECTION A: FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED****1. Application reference number**

The system generated reference number allocated to the application after it was captured must be recorded in paragraph A 1 (for example: C12945).

**SECTION B: FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS RECEIVED****1. Province**

The name of the province where the police station is situated must be recorded in paragraph B 1 (for example: Gauteng).

**2. Area**

The name of the area where the police station is situated must be recorded in paragraph B 2 (for example: Pretoria).

**3. Police station**

The name of the police station where the application was received must be recorded in paragraph B 3 (for example: Brooklyn).

**4. Component code**

The component code of the police station where the application was received must be recorded in paragraph B 4 (for example: 47).

**5. Firearm application register reference number**

The annual serial number of the firearm applications register allocated to the application must be recorded in paragraph B 5 (for example: 135/2002).

**SECTION C: FOR OFFICIAL USE BY CENTRAL FIREARMS REGISTER****1. Outstanding/Additional information required**

When the police official requests outstanding or additional information from the police station or the applicant, the required information must be recorded in paragraph C 1.

**2. Persal number**

The SAPS persal number of the police official must be recorded in paragraph C 2.

**3. Date**

The date on which the outstanding or additional information are required by the police official must be recorded in paragraph C 3.

**4. Signature of police official**

The signature of the police official who requested the outstanding or additional information must be recorded in paragraph C 4.

**5. Name in block letters**

The initials and surname (in block letters) of the police official who requested the outstanding or additional information must be recorded in paragraph C 5.

**6. Application for licence approved (Indicate with X)**

If the application for a temporary authorization is approved, the deciding officer must indicate the approval with "X" in paragraph C 6.

**7. Persal number**

The SAPS persal number of the deciding officer must be recorded in paragraph C 7.

**8. Date**

The date on which the application for temporary authorization was approved by the deciding officer must be recorded in paragraph C 8.

**9. Signature of deciding officer**

The signature of the deciding officer who approved the application for temporary authorization must be recorded in paragraph C 9.

**10. Officer code**

The officer code is a code allocated to each deciding officer. The code of the deciding officer who approved the application for temporary authorization must be recorded in paragraph C 10.

**11. Name in block letters**

The initials and surname (in block letters) of the deciding officer who approved the application for temporary authorization must be recorded in paragraph C 11.

**12. Application for a licence refused (Indicate with X)**

If the application for a temporary authorization is refused, the deciding officer must indicate the refusal with "X" in paragraph C 12.

**13. Reason for refusal**

When an application for a temporary authorization was refused, the deciding officer must record the reason(s) for refusal in paragraph C 13.

**14. Persal number**

The SAPS persal number of the deciding officer must be recorded in paragraph C 14.

**15. Date**

The date on which the application for a temporary authorization was refused by the deciding officer must be recorded in paragraph C 15.

**16. Signature of deciding officer**

The signature of the deciding officer who refused the application for a temporary authorization must be recorded in paragraph C 16.

**17. Officer code**

The officer code is a code allocated to each deciding officer. The code of the deciding officer who refused the application for a temporary authorization must be recorded in paragraph C 17.

**18. Name in block letters**

The initials and surname (in block letters) of the deciding officer who refused the application for a temporary authorization must be recorded in paragraph C 18.

**SECTION D: PARTICULARS OF APPLICANT**

Specify type of temporary authorization is applied for (Indicate with "X")

1. The required answer must be indicated with "X" in paragraph D 1,2,3,4 and 5.

For example:

To trade in firearms and ammunition	X
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**6. Register company name**

The register company name of the applicant must be recorded in paragraph D 6.

**7. Trading as name**

The trading as name of the juristic person must be recorded in paragraph D 7.

**8. FAR number**

The FAR number of the juristic person must be recorded in paragraph D 8.

**9. Postal address**

The postal address of the juristic person must be recorded in paragraph D 9.

**10. Code**

The postal code of the postal address of the juristic person must be recorded in paragraph D 10.

**11. Business address**

The physical address of the juristic person must be recorded in paragraph D 11.

**12. Code**

The postal code of the business address of the juristic person must be recorded in paragraph D 12.

**13. Business telephone number**

14. **Work:** The work telephone number and the dialling code of the juristic person must be recorded in paragraph D 14 (for example: (011) 57 7913).

**15. Fax**

The fax number and the dialling code of the juristic person must be recorded in paragraph D 15 (for example: (012) 667 1923).

**16. E-mail address**

The e-mail address (if applicable) of the juristic person must be recorded in paragraph D 16.

**17. Responsible person (Name and surname)**

The name and surname of the responsible person must be recorded in paragraph D 17.

**18. Type of identification (Indicate with X)  
SA citizen/Non SA citizen with permanent residence**

The type of citizenship must be indicated with "X" in paragraph D 18.

**19. Identity number responsible person**

The identity number of the responsible person must be recorded in paragraph D 19.

**20. Cell phone number**

The cell phone number (if applicable) of the responsible person must be recorded in paragraph D 20.

**21. Physical address**

The physical address where the responsible person resides, must be recorded in paragraph D 21.

**22. Code**

The postal code of the physical address of the responsible person must be recorded in paragraph D 22.

**23. Postal address**

The postal address of the responsible person must be recorded in paragraph D 23.

**24. Code**

The postal code of the postal address of the responsible person must be recorded in paragraph D 24.

25. The reason for the application for a temporary authorization must be recorded in paragraph D 25.

26. The required answer must be indicated with "X" in paragraph D 26.

For example:

To manufacture firearms	X
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**26.1 Licence number**

The licence number must be recorded in paragraph D 26.1.

**26.2 Date issued**

The date issued must be recorded in paragraph D 26.2.

**26.3 Expiry date**

The expiry date must be recorded in paragraph D 26.3.

**27. PHYSICAL ADDRESS OF THE PROPOSED PREMISES  
ON WHICH BUSINESS WILL BE CONDUCTED****27.1 Address**

The physical address where the proposed premises on which business will be conducted must be recorded in paragraph D 27.1.

**27.2 Code**

The postal code of the physical address where the proposed premises on which business will be conducted must be recorded in paragraph D 27.2.

28. The short classification of the proposed premises must be recorded in paragraph D 28.

29. A short description of the premises with reference to the situation and surrounding buildings must be recorded in paragraph D 29.

30. A short description of the alarm system must be recorded in paragraph D 30.

31. A short description of the location and particulars of safe or strongroom in which stocks of firearms and ammunition will be kept must be recorded in paragraph D 31.

32. A short description of the burglar proofing must be recorded in paragraph D 32.

33. A short description of other security features must be recorded in paragraph D 33.

34. The period for which the temporary authorization will be required for the date form and the date to must be recorded in paragraph D 34.



**35. CERTIFICATE BY PERSON WHO IS IN LAWFUL POSSESSION OF THE FIREARM(S)****35.1 Name and surname of current owner/authorized person**

The name and surname of the person who is in lawful possession of the firearm must be recorded in paragraph D 35.1.

**35.2 Identification number of current owner/authorized person**

The identification number of the person who is in lawful possession of the firearm must be recorded in paragraph D 35.2.

**35.3 Designation**

The title of the person handling the estate must be recorded in paragraph D 35.3.

**35.4 Date**

The date on which the person certify the lawful possession of the firearm(s) must be recorded in paragraph D 35.4.

**35.5 Signature of applicant**

The signature of the person who is in lawful possession of the firearms must be recorded in paragraph D 35.5.

**35.6 Place**

The city/town must be recorded in paragraph D 35.6.

**SECTION E: SIGNATURE OF APPLICANT**  
(Sign only where applicable)**1. Signature**

The signature of applicant must be recorded in paragraph E 1.

**2. Photo**

A photo of the applicant must be recorded in paragraph E 2.

**3. Fingerprint**

The thumb print of the applicant must be recorded in paragraph E 3.

**4. Name of applicant in block letters**

The initials and surname (in block letters) of the applicant who applied for the application must be recorded in paragraph E 4.

**5. Date**

The date on which the applicant signed the application must be recorded in paragraph E 5.

**6. Place**

The city/town where the applicant applied for the application must be recorded in paragraph E 6.

**7. PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION****7.1 Name of police official in block letters**

The initials and surname (in block letters) of the police official who deal with the application must be recorded in paragraph E 7.1.

**7.2 Persal number of police official**

The SAPS persal number of police official who deal with application must be recorded in paragraph E 7.2.

**7.3 Rank of police official in block letters**

The rank of police official (in block letters) who deal with applicant must be recorded in paragraph E 7.3.

**7.4 Signature of police official**

The signature of police official who deal with the application must be recorded in paragraph E 7.4.

**8. PARTICULARS OF WITNESS****8.1 Name of witness in block letters**

The initials and surname (in block letters) of the witnessing police official must be recorded in paragraph E 8.1.

**8.2 Persal number of witness**

The SAPS persal number of the witnessing police official must be recorded in paragraph E 8.2.

**8.3 Rank of witness**

The rank of the witnessing police official must be recorded in paragraph E 8.3.

**8.4 Signature of witness**

The signature of the witnessing police official must be recorded in paragraph E 8.4.

**SECTION F: PARTICULARS OF INTERPRETER**

(This section must only be completed if the applicant cannot read or write, or understand the content of this form)

**1. Name and surname of Interpreter**

The name and surname of the person who interpret the content of the application form to the applicant must be recorded in paragraph F 1.

**2. Identity/Passport number of Interpreter**

The identity/passport number of the interpreter must be recorded in paragraph F 2.

**3. Residential address**

The physical address of the interpreter must be recorded in paragraph F 3.

**4. Code**

The postal code of the residential address of the interpreter must be recorded in paragraph F 4.

**5. Postal address**

The postal address of the interpreter must be recorded in paragraph F 5.

**6. Code**

The postal code of the postal address of the interpreter must be recorded in paragraph F 6.

**7. Telephone number****8. Home:** The home telephone number and the dialling code of the interpreter must be recorded in paragraph F 8 (for example: (012) 667 1923).**9. Work:** The work telephone number and the dialling code of the interpreter must be recorded in paragraph F 9 (for example: (011) 57 7913).**10. Cell phone number**

The cell phone number (if applicable) of the interpreter must be recorded in paragraph F 10.

**11. Fax**

The fax number and area dialling code of the interpreter must be recorded in paragraph F 11.



- 12. **E-mail address**  
The e-mail address (if applicable) of the interpreter must be recorded in paragraph F 12.
- 13. **Translated from (language)**  
The translated from language to a language understandable to the applicant must be recorded in paragraph F 13 (for example: English to Zulu).
- 14. **Date**  
The date on which the interpreter supported the applicant must be recorded in paragraph F 14.
- 15. **Signature of interpreter**  
The signature of the interpreter who supported the applicant must be recorded in paragraph F 15.
- 16. **Place**  
The city/town where the interpreter supported the applicant must be recorded in paragraph F 16.
- 17. **Rank of police official in block letters**  
If the interpreter is a police official, the rank of police official who supported the applicant that cannot read or write, or understand the content of this form must be recorded in paragraph F 17.
- 18. **Persal number of police official**  
If the interpreter is a police official the SAPS persal number of the police official who supported the applicant that cannot read or write, or understand the content of this form must be recorded in paragraph F 18.

- 1.2 **Additional conditions recommended**  
Additional conditions recommended must be recorded in paragraph I 1.2.
- 2. **Name of Designated Firearms Officer in block letters**  
The initials and surname (in block letters) of the Designated Firearms Officer that made recommendation must be recorded in paragraph I 2.
- 3. **Date**  
The date on which the Designated Firearm Officer made the recommendation must be recorded in paragraph I 3.
- 4. **Rank of Designated Firearms Officer in block letters**  
The rank of the Designated Firearms Officer (in block letters) that made the recommendation must be recorded in paragraph I 4.
- 5. **Place**  
The city/town where the Designated Firearms Officer made the recommendation must be recorded in paragraph I 5.
- 6. **Signature of Designated Firearms Officer**  
The signature of the Designated Firearms Officer that made the recommendation must be recorded in paragraph I 6.
- 7. **Persal number of the Designated Firearms Officer**  
The SAPS persal number of the Designated Firearms Officer that made the recommendation must be recorded in paragraph I 7.

**SECTION H: IN CASE OF NOMINEE/AUTHORIZED PERSON**

- 1. **Name and surname of nominee/authorized person**  
The name and surname of the nominee/authorized person must be recorded in paragraph H 1.
- 2. **Identity/Passport number of nominee/authorized person**  
The identity/passport number of the nominee/authorized person must be recorded in paragraph H 2.
- 3. **Date**  
The date on which the nominee/authorized person sign must be recorded in paragraph H 3.
- 4. **Signature of nominee/authorized person**  
The signature of the nominee/authorized person must be recorded in paragraph H 5.
- 5. **Place**  
The city/town must be recorded in paragraph H 6.

**SECTION I: FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER**

- 1. **RECOMMENDATION WITH REGARD TO THE APPLICATION**  
The required recommendation must be indicate with "X" in paragraph I 1.

For example:

Recommended	X	Not recommended	
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- 1.1 **Inspection report on premises**  
A inspection report on premises must be recorded in paragraph I 1.1.

SAPS Temporary authorisation to trade



SOUTH AFRICAN POLICE SERVICE

**APPLICATION FOR A TEMPORARY AUTHORIZATION TO TRADE IN FIREARMS AND AMMUNITION, TO CONDUCT BUSINESS AS A GUNSMITH OR TO DISPLAY FIREARMS AND AMMUNITION ON PREMISES OTHER THAN THOSE SPECIFIED FOR DEALERS, MANUFACTURERS AND GUNSMITHS**

[Section 36, 50, 64 of Firearms Control Act, 2000 (Act No 60 of 2000)]

OFFICIAL DATE STAMP
DATE RECEIVED

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED									
1 Application reference no									

B. FOR OFFICIAL USE BY POLICE STATION WHERE APPLICATION IS RECEIVED			
1 Province			
2 Area			
3 Police station			
4 Component code			
5 Firearm applications register reference no	SAPS 86	NO	YEAR

C. FOR OFFICIAL USE BY CENTRAL FIREARMS REGISTER									
6 Outstanding/Additional information required									
7 Persal number C C Y Y - M M - D D 8 Date									
4 Signature of police official					5 Name in block letters				
6 Application for temporary authorization approved (Indicate with X)									
7 Persal number C C Y Y - M M - D D 8 Date									
9 Signature of deciding officer			10 Officer code		11 Name in block letters				
12 Application for temporary authorization refused (Indicate with X)									
13 Reason for refusal									
14 Persal number C C Y Y - M M - D D 15 Date									
16 Signature of deciding officer			17 Officer code		18 Name in block letters				

SAPS Temporary authorisation to trade

**D. PARTICULARS OF APPLICANT**  
Specify type of temporary authorization which is applied for (Indicate with X)

1	To trade in firearms and ammunition	<input type="checkbox"/>
2	To trade in ammunition	<input type="checkbox"/>
3	To manufacture firearms	<input type="checkbox"/>
4	To manufacture ammunition	<input type="checkbox"/>
5	To conduct business as a gunsmith	<input type="checkbox"/>

6	Registered company name											
7	Trading as name											
8	FAR number											
9	Postal address											
			10 Code									
11	Business address											
			12 Code									
13	Business telephone number	14 Work	( )	15 Fax	( )							
16	E-mail address											
17	Responsible person (full name and surname)											
18	Type of identification (Indicate with X)	Non-SA citizen with permanent residence			SA identity							
19	Identity number of responsible person											
20	Cell phone number											
21	Physical address											
			22 Code									
23	Postal address											
			24 Code									

25 STATE THE REASON FOR THE APPLICATION FOR A TEMPORARY AUTHORIZATION

.....

.....

.....

.....

.....

26	Existing licence (Indicate with X)	To trade in firearms and ammunition	To trade in ammunition	To manufacture firearms
		To manufacture ammunition	To conduct business as a gunsmith	
26.1	Licence number			
26.2	Date issued	26.3 Expiry date		
27	PHYSICAL ADDRESS OF THE PROPOSED PREMISES ON WHICH BUSINESS WILL BE CONDUCTED			
27.1	Address			
			27.2 Code	

SAPS Temporary authorisation to trade

28 WHAT IS THE CLASSIFICATION OF PROPOSED PREMISES (EG FARM, HOUSE, SMALLHOLDING, PRIVATE RESIDENCE, COMMERCIAL, ETC)

29 DESCRIBE THE PREMISES WITH REFERENCE TO THE SITUATION AND THE SURROUNDING BUILDINGS

30 DESCRIBE THE ALARM SYSTEM

31 LOCATION AND PARTICULARS OF SAFE OR STRONGROOM IN WHICH STOCKS OF FIREARMS AND AMMUNITION WILL BE KEPT

32 DESCRIBE THE BURGLAR PROOFING

33 DESCRIBE OTHER SECURITY FEATURES

34 Period for which the temporary authorization will be required

FROM Date C C Y Y - M M - D D

TO Date C C Y Y - M M - D D

SAPS Temporary authorisation to trade

35 CERTIFICATE BY PERSON WHO IS IN LAWFUL POSSESSION OF THE FIREARM(S)

I hereby declare that the above firearm(s) is/are legally in my possession and that I propose to sell or supply it to the applicant once the necessary licence(s) has/have been obtained and that the particulars of the firearm(s) are correct and accurate

If I make any false statement on this form I shall be guilty of an offence in terms of Section 120 (9)(f) of the Firearms Control Act, 2000 (Act No 60 of 2000)

35.1 Name and surname of current owner/authorized person

35.2 Identification number of current owner/authorized person

35.3 Designation

35.4 Date C C Y Y - M M - D D

35.5 Signature of current owner/authorized person

35.6 Place

E. SIGNATURE OF APPLICANT (Sign only where applicable)

PHOTO area with signature line and numbers 1, 2, 3

4 Name of applicant in block letters

5 Date C C Y Y - M M - D D

6 Place

7 PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

7.1 Name of police official in block letters

7.2 Persal number of police official

7.3 Rank of police official

7.4 Signature of police official

8 PARTICULARS OF WITNESS

8.1 Name of witness in block letters

8.2 Persal number of witness

8.3 Rank of witness

8.4 Signature of witness

SAPS Temporary authorisation to trade

**F. PARTICULARS OF INTERPRETER**  
(This section must only be completed if the applicant cannot read or write, or understand this document)

1	Name and surname of interpreter													
2	Identity/Passport number of interpreter													
3	Residential address													
			4 Code											
5	Postal address													
			6 Code											
7	Telephone number	8 Home ( )	9 Work ( )											
10	Cell phone number	11 Fax ( )												
12	E-mail address													
13	Translated from (language)		to											
			14 Date C C Y Y - M M - D D											
15	Signature of interpreter		16 Place											
17	Rank of police official		18 Persal number of police official											

**G. IN CASE OF NOMINEE/AUTHORIZED PERSON**

1	Name and surname of nominee/authorized person													
2	Identity/Passport number of nominee/authorized person													
			3 Date C C Y Y - M M - D D											
4	Signature of nominee/authorized person		5 Place											

**H. FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER**

1		RECOMMENDATION WITH REGARD TO THE APPLICATION											
		Recommended						Not recommended					
1.1	Inspection report on premises	.....											
		.....											
		.....											
		.....											
		.....											
		.....											
		.....											
		.....											

SAPS Temporary authorisation to trade

1.2

Additional conditions recommended	

2

--

Name of Designated Firearms Officer in block letters

4

--

Rank of Designated Firearms Officer

6

Signature of Designated Firearms Officer

3

Date	C	C	M	M	-	M	M	D	D
------	---	---	---	---	---	---	---	---	---

5

Place	
-------	--

7

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Personal number of Designated Firearms Officer





**INSTRUCTIONS: APPLICATION FOR A LICENCE ISSUED TO PARTICULAR CATEGORIES  
OR PERSONS - DEALERS, MANUFACTURERS OR GUNSMITHS**

**GENERAL INSTRUCTIONS**

- An application for a licence to possess a firearm must be completed in indelible black ink.
- Section I of this application form must be completed by the Designated Firearms Officer.
- Section C of this application form must be completed by the Central Firearms Register.
- Sections D, E and F of this application form must be completed by the applicant.
- Section G of this application must be completed by the interpreter if an interpreter was used.
- Section H of this application form must be completed by a nominee/authorized person if a nominee/authorized person was used.
- A person is guilty of an offence in terms of the Firearms Control Act, 60 of 2000, if he/she furnishes false information on this application form.

**SECTION A: FOR OFFICIAL USE BY THE POLICE STATION  
WHERE THE APPLICATION IS CAPTURED****1. Application reference number**

The system generated reference number allocated to the application after it was captured must be recorded in paragraph A 1 (for example: C12945).

**SECTION B: FOR OFFICIAL USE BY THE POLICE STATION  
WHERE THE APPLICATION IS RECEIVED****1. Province**

The name of the province where the police station is situated must be recorded in paragraph B 1 (for example: Gauteng).

**2. Area**

The name of the area where the police station is situated must be recorded in paragraph B 2 (for example: Pretoria).

**3. Police station**

The name of the police station where the application was received must be recorded in paragraph B 3 (for example: Brooklyn).

**4. Component code**

The component code of the police station where the application was received must be recorded in paragraph B 4 (for example: 47).

**5. Firearm application register reference number**

The annual serial number of the firearm applications register allocated to the application must be recorded in paragraph B 5 (for example: 135/2002).

**SECTION C: FOR OFFICIAL USE BY CENTRAL FIREARMS  
REGISTER****1. Outstanding/Additional information required**

When the police official requests outstanding or additional information from the police station or the applicant, the required information must be recorded in paragraph C 1.

**2. Persal number**

The SAPS persal number of the police official must be recorded in paragraph C 2.

**3. Date**

The date on which the outstanding or additional information are required by the police official must be recorded in paragraph C 3.

**4. Signature of police official**

The signature of the police official who requested the outstanding or additional information must be recorded in paragraph C 4.

**5. Name in block letters**

The initials and surname (in block letters) of the police official who requested the outstanding or additional information must be recorded in paragraph C 5.

**6. Application for licence approved (Indicate with X)**

If the application for licence issued to particular categories or persons is approved, the deciding officer must indicate the approval with "X" in paragraph C 6.

**7. Persal number**

The SAPS persal number of the deciding officer must be recorded in paragraph C 7.

**8. Date**

The date on which the application was approved by the deciding officer must be recorded in paragraph C 8.

**9. Signature of deciding officer**

The signature of the deciding officer who approved the application must be recorded in paragraph C 9.

**10. Officer code**

The officer code is a code allocated to each deciding officer. The code of the deciding officer who approved the application must be recorded in paragraph C 10.

**11. Name in block letters**

The initials and surname (in block letters) of the deciding officer who approved the application must be recorded in paragraph C 11.

**12. Application for a licence refused (Indicate with X)**

If the application for application for licence issued to particular categories or persons is refused the deciding officer must indicate the refusal with "X" in paragraph C 12.

**13. Reason for refusal**

When an application was refused, the deciding officer must record the reason(s) for refusal in paragraph C 13.

**14. Persal number**

The SAPS persal number of the deciding officer must be recorded in paragraph C 14.

**15. Date**

The date on which the application was refused by the deciding officer must be recorded in paragraph C 15.

**16. Signature of deciding officer**

The signature of the deciding officer who refused the application must be recorded in paragraph C 16.

**17. Officer code**

The officer code is a code allocated to each deciding officer. The code of the deciding officer who refused the application must be recorded in paragraph C 17.

**18. Name in block letters**

The initials and surname (in block letters) of the deciding officer who refused the application must be recorded in paragraph C 18.

**SECTION D: PARTICULARS OF DEALER/MANUFACTURER/  
GUNSMITH****1. PARTICULARS OF COMPETENCY CERTIFICATE****1.1 Type of competency certificate**

The type of competency certificate must be recorded in paragraph D 1.1.

**1.2 Competency certificate number**

The competency certificate number must be recorded in paragraph D 1.2.

**1.3 Date of issue**

The date of issue of the existing competency certificate must be recorded in paragraph D 1.3.

**1.4 Expiry date**

The expiry date of the existing competency certificate must be recorded in paragraph D 1.4.

**2. SPECIFY TYPE OF LICENCE WHICH IS APPLIED OR  
(Indicate with X)**

The required type of licence must be indicated with "X" in paragraph D 2.

For example:

To trade in firearms and ammunition:	X
--------------------------------------	---

**SECTION E: PARTICULARS OF APPLICANT****1. NATURAL PERSON'S DETAILS****1.1 Surname**

The surname of the natural person must be recorded in paragraph E 1.1.

**1.2 Initials**

The initials of the natural person must be recorded in paragraph E 1.2.

**1.3 Full names**

The full names of the natural person must be recorded in paragraph E 1.3.

**1.4 Identity number of natural person**

The identity number of the natural person must be recorded in paragraph E 1.4.

**1.5 Passport number of natural person**

The passport number of the natural person must be recorded in paragraph E 1.5.

**1.6 Business address**

The physical address where the natural person resides, must be recorded in paragraph E 1.6.

**1.7 Code**

The postal code of the residential address of the natural person must be recorded in paragraph E 1.7.

**1.8 Postal address**

The postal address of the natural person must be recorded in paragraph E 1.8.

**1.9 Code**

The postal code of postal address of the natural person must be recorded in paragraph E 1.9.

**1.10 Telephone number**

**1.11 Home:** The home telephone number and the dialling code of the natural person must be recorded in paragraph E 1.11 (for example (012) 667 1923).

**1.12 Work:** The work telephone number and the dialling code of the natural person must be recorded in paragraph E 1.12 (for example: (011) 57 7913).

**1.13 Cell phone number**

The cell phone number (if applicable) of the natural person must be recorded in paragraph E 1.13.

**1.14 Fax**

The fax number and area dialling code of the natural person must be recorded in paragraph E 1.14.

**1.15 E-mail address**

The e-mail address (if applicable) of the natural person must be recorded in paragraph E 1.15.

**2. JURISTIC PERSONS DETAILS****2.1 Register company name**

The register company name of the juristic person must be recorded in paragraph E 2.1.

**2.2 Trading as name**

The trading as-name of the juristic person must be recorded in paragraph E 2.2.

**2.3 Name under which business is to be carried on**

The name under which the business is to be carried on must be recorded in paragraph E 2.3.

**2.4 FAR number**

The FAR number of the juristic person must be recorded in paragraph E 2.4.

**2.5 CC or company registration no**

The CC or company registration number must be recorded in paragraph E 2.5.

**3. RESPONSIBLE PERON'S DETAILS****3.1 Responsible person (Name and surname)**

The name and surname of the responsible person must be recorded in paragraph E 3.1.

**3.2 Type of identification (Indicate with X)  
SA identity/Passport number**

The type of identification must be indicated with "X" in paragraph E 3.2.

**3.3 Identity number of responsible person**

The identity number of the responsible person must be recorded in paragraph E 3.3.

**3.4 Passport number of responsible person**

The passport number of the responsible person must be recorded in paragraph E 3.4.

**3.5 Cell phone number**

The cell phone number (if applicable) of the responsible person must be recorded in paragraph E 3.5.

**3.6 Physical address**

The physical address where the responsible person resides, must be recorded in paragraph E 3.6.

**3.7 Code**

The postal code of the physical address of the responsible person must be recorded in paragraph E 3.7.

**3.8 Postal address**

The postal address of the responsible person must be recorded in paragraph E 3.8.

**3.9 Code**

The postal code of the postal address of the responsible person must be recorded in paragraph E 3.9.

**4. PREMISES DETAILS****4.1 PHYSICAL ADDRESS OF THE PROPOSED PREMISES ON WHICH BUSINESS WILL BE CONDUCTED****Address**

The physical address where the proposed premises on which business will be conducted must be recorded in paragraph E 4.2.

**Code**

The postal code of the physical address where the proposed premises on which business will be conducted must be recorded in paragraph E 4.3.

4.2 The short classification of the proposed premises must be recorded in paragraph E 4.4.

4.3 A short description of the premises with reference to the situation and surrounding buildings must be recorded in paragraph E 4.5.

4.4 A short description of the alarm system must be recorded in paragraph E 4.4.

4.5 A short description of the location and particulars of safe or strongroom in which stocks of firearms and ammunition will be kept must be recorded in paragraph E 4.5.

4.6 A short description of the burglar proofing must be recorded in paragraph E 4.6.

4.7 A short description of other security features must be recorded in paragraph E 4.7.

4.8 Submit a short description of your workstation which will link the register to the Central Database. In case of a dealer or a gunsmith, submit the reason(s) why the Registrar must exempt you from maintaining a linked workstation.

4.9 The period for which the commencement of business will be required for must be recorded in paragraph E 4.9.

**5. CERTIFICATE BY PERSON WHO IS IN LAWFUL POSSESSION OF THE FIREARM(S)****5.1 Name and surname of current owner/authorized person**

The name and surname of the person who is in lawful possession of the firearm must be recorded in paragraph E 5.1.

**5.2 Identification number of current owner/authorized person**

The identification number of the person who is in lawful possession of the firearm must be recorded in paragraph E 5.2.

**5.3 Designation**

The title of the person handling the estate must be recorded in paragraph E 5.3.

**5.4 Date**

The date on which the person certify the lawful possession of the firearm(s) must be recorded in paragraph E 5.4.

**5.5 Signature of applicant**

The signature of the person who is in lawful possession of the firearms must be recorded in paragraph E 5.5.

**5.6 Place**

The city/town must be recorded in paragraph E 5.6.

**SECTION F: SIGNATURE OF APPLICANT  
(Sign only where applicable)****1. Signature**

The signature of applicant must be recorded in paragraph F 1.

**2. Photo**

A photo of the applicant must be recorded in paragraph F 2.

**3. Fingerprint**

The thumb print of the applicant must be recorded in paragraph F 3.

**4. Name of applicant in block letters**

The initials and surname (in block letters) of the applicant who applied for the application must be recorded in paragraph F 4.

**5. Date**

The date on which the applicant signed the application must be recorded in paragraph F 5.

**6. Place**

The city/town where the applicant applied for the application must be recorded in paragraph F 6.

**7. PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION****7.1 Name of police official in block letters**

The initials and surname (in block letters) of the police official who deal with the application must be recorded in paragraph F 7.1.

**7.2 Peral number of police official**

The SAPS peral number of police official who deal with application must be recorded in paragraph F 7.2.

**7.3 Rank of police official in block letters**

The rank of police official (in block letters) who deal with applicant must be recorded in paragraph F 7.3.

**7.4 Signature of police official**

The signature of police official who deal with the application must be recorded in paragraph F 7.4.

**8. PARTICULARS OF WITNESS****8.1 Name of witness in block letters**

The initials and surname (in block letters) of the witnessing police official must be recorded in paragraph F 8.1.

**8.2 Peral number of witness**

The SAPS peral number of the witnessing police official must be recorded in paragraph F 8.2.

**8.3 Rank of witness**

The rank of the witnessing police official must be recorded in paragraph H F.3.

**8.4 Signature of witness**

The signature of the witnessing police official must be recorded in paragraph F 8.4.

**SECTION G: PARTICULARS OF INTERPRETER**

(This section must only be completed if the applicant cannot read or write, or understand the content of this form)

1. **Name and surname of interpreter**  
The name and surname of the person who interpret the content of the application form to the applicant must be recorded in paragraph G 1.
2. **Identity/Passport number of interpreter**  
The identity/passport number of the interpreter must be recorded in paragraph G 2.
3. **Residential address**  
The physical address of the interpreter must be recorded in paragraph G 3.
4. **Code**  
The postal code of the residential address of the interpreter must be recorded in paragraph G 4.
5. **Postal address**  
The postal address of the interpreter must be recorded in paragraph G 5.
6. **Code**  
The postal code of the postal address of the interpreter must be recorded in paragraph G 6.
7. **Telephone number**
8. **Home:** The home telephone number and the dialling code of the interpreter must be recorded in paragraph G 8 (for example: (012) 667 1923).
9. **Work:** The work telephone number and the dialling code of the interpreter must be recorded in paragraph G 9 (for example: (011) 57 7913).
10. **Cell phone number**  
The cell phone number (if applicable) of the interpreter must be recorded in paragraph G 10.
11. **Fax**  
The fax number and area dialling code of the interpreter must be recorded in paragraph G 11.
12. **E-mail address**  
The e-mail address (if applicable) of the interpreter must be recorded in paragraph G 12.
13. **Translated from (language)**  
The translated from language to a language understandable to the applicant must be recorded in paragraph G 13 (for example: English to Zulu).
14. **Date**  
The date on which the interpreter supported the applicant must be recorded in paragraph G 14.
15. **Signature of interpreter**  
The signature of the interpreter who supported the applicant must be recorded in paragraph G 15.
16. **Place**  
The city/town where the interpreter supported the applicant must be recorded in paragraph G 16.

**17. Rank of police official in block letters**

If the interpreter is a police official, the rank of police official who supported the applicant that cannot read or write, or understand the content of this form must be recorded in paragraph G 17.

**18. Peral number of police official**

If the interpreter is a police official the SAPS peral number of the police official who supported the applicant that cannot read or write, or understand the content of this form must be recorded in paragraph G 18.

**SECTION H: IN CASE OF NOMINEE/AUTHORIZED PERSON**

**1. Name and surname of nominee/authorized person**

The name and surname of the nominee/authorized person must be recorded in paragraph H 1.

**2. Identity/Passport number of nominee/authorized person**

The identity/passport number of the nominee/authorized person must be recorded in paragraph H 2.

**3. Date**

The date on which the nominee/authorized person sign must be recorded in paragraph H 3.

**4. Signature of nominee/authorized person**

The signature of the nominee/authorized person must be recorded in paragraph H 5.

**5. Place**

The city/town must be recorded in paragraph H 6.

**SECTION I: FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER**

**1. RECOMMENDATION WITH REGARD TO THE APPLICATION**

The required recommendation must be indicate with "X" in Paragraph I 1.

For example:

Recommended	X	Not recommended	
-------------	---	-----------------	--

**2. Inspection report on premises**

An inspection report on premises must be recorded paragraph I 2.

**3. Additional conditions recommended**

The additional conditions recommended by the Designated Firearms Officer must be recorded in paragraph I 3.

**4. Recommendation regarding the application**

The recommendation regarding the application must be recorded in paragraph I 4.

**5. Name of Designated Firearms Officer in block letters**

The initials and surname (in block letters) of the Designated Firearms Officer that made recommendation must be recorded in paragraph I 5.

**6. Date**

The date on which the Designated Firearm Officer made the recommendation must be recorded in paragraph I 6.

**7. Rank of Designated Firearms Officer in block letters**

The rank of the Designated Firearms Officer (in block letters) that made the recommendation must be recorded in paragraph I 7.

**8. Place**

The city/town where the Designated Firearms Officer made the recommendation must be recorded in paragraph 8.

**9. Signature of Designated Firearms Officer**

The signature of the Designated Firearms Officer that made the recommendation must be recorded in paragraph 9.

**10. Persal number of the Designated Firearms Officer**

The SAPS persal number of the Designated Firearms Officer that made the recommendation must be recorded in paragraph 10.





SOUTH AFRICAN POLICE SERVICE

APPLICATION FOR LICENCE ISSUED TO PARTICULAR CATEGORIES OR PERSONS - DEALERS, MANUFACTURERS OR GUNSMITHS

[Section 34, 48 and 82 of Firearms Control Act, 2000 (Act No 60 of 2000)]

OFFICIAL DATE STAMP
DATE RECEIVED

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED									
1 Application reference no									

B. FOR OFFICIAL USE BY POLICE STATION WHERE APPLICATION RECEIVED			
1 Province			
2 Area			
3 Police station			
4 Component code			
5 Firearm applications register reference no	SAPS.86	NO	YEAR

C. FOR OFFICIAL USE BY CENTRAL FIREARMS IS REGISTER									
1 Outstanding/Additional information required									
2 Personal number C C Y Y - M M - D D 3 Date									
4 Signature of police official					5 Name in block letters				
6 Application for licence approved (Indicate with X)									
7 Personal number C C Y Y - M M - D D 8 Date									
9 Signature of deciding officer			10 Officer code		11 Name in block letters				
12 Application for licence refused (Indicate with X)									
13 Reason for refusal									
14 Personal number C C Y Y - M M - D D 15 Date									
16 Signature of deciding officer			17 Officer code		18 Name in block letters				

SAPS Application for particular categories

**D. PARTICULARS OF DEALER/MANUFACTURER/GUNSMITH**

**1 Particulars of competency certificate**

1.1	Type of competency certificate																					
1.2	Competency certificate number																					
1.3	Date issued	C	C	Y	Y	-	M	M	-	D	D	1.4 Expiry date	C	C	Y	Y	-	M	M	-	D	D

**2 Specify type of licence which is applied for (Indicate with X)**

2.1	To trade in firearms and ammunition	<input type="checkbox"/>
2.2	To trade in ammunition	<input type="checkbox"/>
2.3	To manufacture firearms	<input type="checkbox"/>
2.4	To manufacture ammunition	<input type="checkbox"/>
2.5	To conduct business as a gunsmith	<input type="checkbox"/>

**E. PARTICULARS OF APPLICANT**

**1 NATURAL PERSON'S DETAILS**

1.1	Surname											1.2 Initials						
1.3	Full names																	
1.4	Identity number of natural person																	
1.5	Passport number of natural person																	
1.6	Business address													1.7 Code				
1.8	Postal address													1.8 Code				
1.10	Telephone number	1.11 Home	( )	1.12 Work	( )													
1.13	Cell phone number					1.14 Fax	( )											
1.15	E-mail address																	

**2 JURISTIC PERSON'S DETAILS**

2.1	Registered company name																
2.2	Trading as name																
2.3	Name under which business is to be carried on																
2.4	Fax number																
2.5	CC or company registration no																

**3 RESPONSIBLE PERSON'S DETAILS**

3.1	Responsible person (full name and surname)																	
3.2	Type of identification (Indicate with X)					SA identity					Passport number							
3.3	Identity number of responsible person																	
3.4	Passport number of responsible person																	
3.5	Cell phone number																	
3.6	Physical address													3.7 Code				
3.8	Postal address													3.8 Code				



4 PREMISES DETAILS

4.1 PHYSICAL ADDRESS OF PROPOSED PREMISES AT WHICH BUSINESS WILL BE CONDUCTED

Address					
.....					
.....					
.....					
				Code	

4.2 CLASSIFICATION OF PROPOSED PREMISES (EG FARM, HOUSE, SMALLHOLDING, PRIVATE RESIDENCE, COMMERCIAL, ETC)

.....				
.....				
.....				

4.3 DESCRIBE THE PREMISES WITH REFERENCE TO THE SITUATION AND THE SURROUNDING BUILDINGS

.....				
.....				
.....				

4.4 DESCRIBE THE ALARM SYSTEM

.....				
.....				
.....				

4.5 LOCATION AND PARTICULARS OF SAFE OR STRONGROOM IN WHICH STOCKS OF FIREARMS AND AMMUNITION WILL BE KEPT

.....				
.....				
.....				

4.6 DESCRIBE THE BURGLAR PROOFING

.....				
.....				
.....				

4.7 DESCRIBE OTHER SECURITY FEATURES

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.....				
.....				

4.8 \* DEALERS, GUNSMITHS AND MANUFACTURERS MUST ESTABLISH AND MAINTAIN A WORKSTATION WHICH LINKS THEIR REGISTERS TO THE CENTRAL DEALERS, GUNSMITHS OR MANUFACTURERS DATABASE  
 \* THE REGISTRAR MAY, ON GOOD CAUSE SHOWN, EXEMPT DEALERS OR GUNSMITHS FROM THIS DUTY

Submit a description of the workstation which will link your registers to the Central Database  
 In case of a dealer or a gunsmith, submit the reason(s) why the Registrar must exempt you from maintaining a linked workstation

.....				
.....				
.....				

4.9 Date of commencement of business

C	C	Y	Y	-	M	M	-	D	D
---	---	---	---	---	---	---	---	---	---

SAPS Application for particular categories

5 CERTIFICATE BY PERSON WHO IS IN LAWFUL POSSESSION OF THE FIREARM(S)

I hereby declare that the above firearm(s) is/are legally in my possession and that I propose to sell or supply it to the applicant once the necessary licence(s) has/have been obtained and that the particulars of the firearm(s) are correct and accurate

If I make any false statement on this form I shall be guilty of an offence in terms of Section 120 (9)(f) of the Firearms Control Act, 2000 (Act No 60 of 2000)

5.1 Name and surname of current owner/authorized person

5.2 Identification number of current owner/authorized person

5.3 Designation

5.4 Date

5.5 Signature of current owner/authorized person

5.6 Place

F. SIGNATURE OF APPLICANT (Sign only where applicable)

PHOTO

Signature

4 Name of applicant in block letters

5 Date

6 Place

7 PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

7.1 Name of police official in block letters

7.2 Persal number of police official

7.3 Rank of police official

7.4 Signature of police official

8 PARTICULARS OF WITNESS

8.1 Name of witness in block letters

8.2 Persal number of witness

8.3 Rank of witness

8.4 Signature of witness



SAPS Application for particular categories

3

Additional conditions recommended

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Recommendation regarding the application

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5

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Name of Designated Firearms Officer in block letters

7

.....

Rank of Designated Firearms Officer

9

Signature of Designated Firearms Officer

6

Date: C C Y Y - M M - D D

8

Place: .....

10

.....

Persal number of Designated Firearms Officer