GOVERNMENT GAZETTE, 27 MARCH 2003

INSTRUCTIONS: APPLICATION FOR A TEMPORARY AUTHORIZATION TO POSSESS A FIREARM

GENERAL INSTRUCTIONS

- An application for a licence to possess a firearm must be completed in indelible black ink.
- Section L 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,F,G and H of this application form must be completed by the applicant.
- Section 1 of this application must be completed by the interpreter if an interpreter was used.
- Section J of this application form must be completed by the parent or quardian when the applicant is younger than 18 years old
- or guardian when the applicant is younger than 18 years old. • Section K 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. Provinca

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

6. Application for temporary authorization approved (Indicate with X)

If the application for 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 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 temporary authorization refused (Indicate with X)

If the application for a licence to possess 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: DESCRIPTION OF FIREARM (Indicate with X)

 The required description of firearm must be indicated with *X* in paragraph D 1.



- 2. PARTICULARS OF FIREARM (Indicate with X)
- 3. The required action must be indicated with "X" in paragraph D 3.



4. Calibre

The calibre of the firearm must be recorded in paragraph D 4.

5. Make

The make of the firearm must be recorded in paragraph D 5.

6. Model

The model of the firearm must be recorded in paragraph D 6.

7. Barrel serial number

The barrel serial number must be recorded in paragraph D 7.

8. Make

The make of the barrel serial number must be recorded in paragraph D 8.

9. Frame serial number

The frame serial number must be recorded in paragraph D 9.3

10. Make

The make of the frame serial number must be recorded in paragraph D 10.

- 11. Receiver serial number
- Make The make of the receiver serial number must be recorded in paragraph D 12.

The receiver serial number must be recorded in paragraph D11.

13. Every name and address engraved in the metal

Every name and address engraved in the metal of the firearm must be recorded in paragraph D 13.

SECTION E: PARTICULARS OF PERSON IN POSSESSION OF FIREARM

1.1 Surname

The sumame of the person in possession of the firearm must be recorded in paragraph E 1.1.

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

1.3 Full names

Initials

1.2

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

1.4 Identity number of person in possession of firearm

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

1.5 Passport number of person in possession of firearm

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

1.6 Residential address

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

1.7 Code

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

1.8 Postal address

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

1.9 Code The postal code of postal address of the person in possession

- of the firearm 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 person in possession of the firearm 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 person in possession of the firearm 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 person in possession of the firearm must be recorded in paragraph E 1.13.

1.14 Fax

The fax humber and area dialling code of the person in possession of the firearm must be recorded in paragraph E 1.14.

1.15 E-mail address

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

- 2. OTHER BODIES (eg body of corporate, closed corporation or company)
- 2.1 Register company name

The register company name of the body or corporate, closed corporation or company must be recorded in paragraph E 2.1.

2.2 Trading as name

The trading as name of the body or corporate, closed corporation or company must be recorded in paragraph E 2.2.

2.3 Company registration number

The company registration number must be recorded in paragraph E 2.3.

2.4 FAR number

The FAR number of the body or corporate, closed corporation or company must be recorded in paragraph E 2.4.

2.5 Postal address

The postal address of the body or corporate, closed corporation or company must be recorded in paragraph E 2.5.

2.6 Code

The postal code of the postal address of the body or corporate, closed corporation or company must be recorded in paragraph E 2.6.

GOVERNMENT GAZETTE, 27 MARCH 2003

2.7 Business address

The physical address where the body or corporate, closed corporation or company conduct business from, must be recorded in paragraph E 2.7.

2.8 Code

The postal code of the business address of the body or corporate, closed corporation or company must be recorded in paragraph E 2.8.

2.9 Business telephone number

2.10 Work: The work telephone number and the dialling code of the body or corporate, closed corporation or company must be recorded in paragraph E 2.10 (for example: (011) 57 7913).

2.11 Fax

The fax number and the dialling code of the body or corporate, closed corporation or company must be recorded in paragraph E 2.11(for example: (012) 667 1923).

2.12 E-mail address

The e-mail address (if applicable) of the body or corporate, closed corporation or company must be recorded in paragraph E 2.12.

2.13 Responsible person (Name and surname)

The name and surname of the responsible person must be recorded in paragraph E 2.13.

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

The type of citizenship must be indicated with "X" in paragraph Ξ 2.14.

2.15 Identity number of responsible person

The identity number of the responsible person must be recorded in paragraph E 2.15.

2.16 Passport number of responsible person

The passport number of the responsible person must be recorded in paragraph E 2.16.

2.17 Cell phone number

The cell phone number (if applicable) of the responsible person must be recorded in paragraph E 2.17.

2.18 Physical address

The physical address where the responsible person resides, must be recorded in paragraph E 2.18.

2.19 Code

The postal code of the physical address of the responsible person must be recorded in paragraph \pm 2.19.

2.20 Postal address

The postal address of the responsible person must be recorded in paragraph E 2.20.

2.21 Code

The postal code of the postal address of the responsible person must be recorded in paragraph E 2.21.

- 3. SIGNATURE OF PERSON CURRENTLY IN POSSESSION
- 3.1 Name of person currently in possession in block letters

The initials and surname (in block letters) of the person currently in possession must be recorded in paragraph E 3.2.

3.2 Date

The date must be recorded in paragraph E 3.2.

3.3 Signature of person currently in possession

The signature of the person currently in possession must be recorded in paragraph E 3.3.

3.4 Place

The place must be recorded in paragraph E 3.4.

SECTION F: PARTICULARS OF APPLICANT

- 1. NATURAL PERSON'S DETAILS
- 1.1 Type of identification (Indicate with X)
- 1.2 SA identity/Passport number

The type of identification must be indicated with "X" in paragraph F 1.2.

1.3 identity number of natural person

The identity number of the natural person must be recorded in paragraph F 1.3.

1.4 Passport number of natural person

The passport number of the natural person must be recorded in paragraph F 1.4.

1.5 Surname

The summe of the natural person must be recorded in paragraph F 1.5.

1.6 Initials

The initials of the natural person must be recorded in paragraph E 1.6.

1.7 Full names

The full names of the natural person must be recorded in paragraph F 1.7.

1.8 Date of birth

The date of birth of the natural person must be recorded in paragraph ${\rm F}$ 1.8.

1.9 Age

The age of the natural person must be recorded in paragraph F 1.9. $\,$

1.10 Gender

The gender of the natural person must be indicate with "X" in paragraph F 1.10.

1.11 Residential address

The physical address where the natural person resides, must be recorded in paragraph F 1.11.

1.12 Code

The postal code of the residential address of the natural person must be recorded in paragraph F 1.12.

1.13 Postal address

The postal address of the natural person must be recorded in paragraph F 1.13.

1.14 Code

The postal code of the postal address of the natural person be recorded in paragraph F 1.14.

1.15 Type of residence (eg shack, flat, caravan, cottage or house)

The type of residence of the natural person must be recorded in paragraph F 1.15.

1.16 Trade or profession

The natural person's trade or profession must be recorded in paragraph F 1.16 (for example: motor mechanic).

1.17 If self employed, specify

If the natural person is self employed, it must be recorded in paragraph F 1.17 (for example: hair dresser - work form home).

1.18 Name of employer/company

The name of the natural person's employer or company must be recorded in paragraph F 1.18 (for example: The Auto Shop).

1.19 Business address

The business address of the natural person's employer must be recorded in paragraph F 1.19 (for example: 123 West street, Sandton).

1.20 Code

The postal code of the natural person's business address must be recorded in paragraph F $\pm 20.$

1.21 Telephone number

- 1.22 Home: The home telephone number and the dialling code of the natural person must be recorded in paragraph F 1.22 (for example: (012) 667 1923).
- 1.23 Work: The work telephone number and the dialiling code of the natural person must be recorded in paragraph F 1.23 (for example: (011) 57 7913).

1.24 Cell phone number

The cell phone number (if applicable) of the natural person must be recorded in paragraph F 1.24.

1.25 Fax

The fax number and area dialling code of the natural person must be recorded in paragraph F 1.25.

1.26 E-mail address

The e-mail address (if applicable) of the natural person must be recorded in paragraph F 1:26.

2. JURISTIC PERSON'S DETAILS

2.1 Register company name

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

2.2 Trading as name

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

2.3 FAR number

The FAR number of the juristic person must be recorded in paragraph F 2.3.

2.4 Postal address

The postal address of the juristic person must be recorded in paragraph F 2.4.

2.5 Code

The postal code of the postal address of the juristic person must be recorded in paragraph F 2.5.

2.6 Business address

The physical address of the juristic person must be recorded in paragraph F 2.6.

2.7 Code

The postal code of the business address of the juristic person must be recorded in paragraph F 2.7.

- 2.8 Business telephone number
- 2.9 Work: The work telephone number and the dialling code of the juristic person must be recorded in paragraph F 2.9 (for example: (011) 57 7913).
- 2.10 Fax

The fax number and the dialling code of the juristic person must be recorded in paragraph F 2.10 (for example: (012) 667 1923).

2.11 E-mail address

The e-mail address (if applicable) of the juristic person must be recorded in paragraph F 2.11. $_{\rm max}$

2.12 Responsible person (Name and surname)

The name and sumame of the responsible person must be recorded in paragraph F 2.12.

- 2.13 Type of identification (Indicate with X) SA identity/Passport number The type of identification must be indicated with "X" in paragraph F 2.13.
- 2.14 Identity number of responsible person
 - The identity number of the responsible person must be recorded in paragraph F 2.14
- 2.15 Passport number of responsible person
 - The passport number of the responsible person must be recorded in paragraph F 2.15.
- 2.16 Call phone number

The cell phone number (if applicable) of the responsible person must be recorded in paragraph F 2.16.

2.17 Physical address

The physical address where the responsible person resides, must be recorded in paragraph \mathcal{F} 2.17.

2.18 Code

The postal code of the physical address of the responsible person must be recorded in paragraph F 2.18.

2.19 Postal address

The postal address of the responsible person must be recorded in paragraph F 2.19.

2.20 Code

The postal code of the postal address of the responsible person must be recorded in paragraph F 2.20.

SECTION G: OTHER DETAILS

1. Period for which authorization is required

The period for which the authorization is required must be recorded in paragraph G 1.

- 1.1 The motivation of purpose for which the firearm is required must be recorded in paragraph G 1.1.
- 1.2 The required answer must be indicated with "X" in paragraph G 1.2. If the answer is yes, the following information must be submitted:

1.2.1 Police station

The name of the police station where case was registered must be recorded in paragraph G 1.2.1 (for example: Sunnyside).

GOVERNMENT GAZETTE, 27 MARCH 2003

1.2.2 CAS/Case number

CAS/Case number of the investigation/offence must be recorded in paragraph G 1.2.2 (for example: 179/10/2002).

1.2.3 Charge

The description of the investigation/offence must be recorded in paragraph G 1.2.3 (for example: Assault).

1.2.4 Result

The result of the investigation/offence must be recorded in paragraph G 1.2.4 (for example: R200 or 12 months imprisonment).

- The required answer must be indicated with "X" in paragraph G 1.3. If the answer is yes, the following information must be 1.3 submitted:
- 1.3.1 Police station

The name of the police station where the case is pending must be recorded in paragraph G 1.3.1 (for example: Sunnyside).

1.3.2 CAS/Case number

CAS/Case number of pending case(s) must be recorded in paragraph G 1.3.2 (for example: 179/10/2002),

1.3.3 Circumstances

The description of the offence regarding pending case(s) must be recorded in paragraph G 1.3.3 (for example: Assault).

The required answer must be indicate with "X" in paragraph G 1.4 1.4. If the anser is yes, the following information must be submitted:

1.4.1 Police station

The name of the police station where the case was registered must be recorded in paragraph G 1.4.1 (for example: Sumpside).

1.4.2 CAS/Case number

CAS/Case number of the investigation/offence must be recorded in paragraph G 1.4.2 (for example: 179/10/2002)./

- 1.4.3 Result
 - The description of the investigation/offence must be recorded in paragraph G 1.4.3 (for example: Declared unfit for period of 5 vears). يتحقيق المتعلمين

1 13

1.4.4 Date

The date of unfitness must be recorded in paragraph G 1.4.4.

- The required answer must be indicated with "X" in paragraph 1.5 G 1.3. If the answer is yes, the following information must be submitted:
- 1.5.1 Police station The name of the police station where the firearm(s) was reported lost/stolen must be recorded in paragraph G 1.5.1 (for example: Sunnyside).
- 1.5.2 CAS/Case number

CAS/Case number of the firearm(s) that was reported lost/stolen must be recorded in paragraph G 1.5.2 (for example: 179/10/2002).

1.5.3 Result

The result of the investigation/offence must be recorded in paragraph G 1.5.3 (for example: R200 or 12 months

The required answer must be indicated with "X" in paragraph G 1.6. If the answer is yes, the following information must 1.6 be submitted:

- A short description of the type of safe must be recorded in paragraph G 1.6.
- 1.7 A short description of previous experience in the handling of firearms or previous training in firearms must be recorded in paragraph G 1.7.
- CERTIFICATE BY PERSON WHO IS IN LAWFUL 2. POSSESSION OF THE FIREARM(S)
- 2.1 Name and surname of current owner/authorized person

The name and sumame of the person who is in lawful possession of the firearm must be recorded in paragraph G 2.1.

- 2.2 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 G 2.2.
- 2.3 Designation The title of the person handling the estate must be recorded in
 - paragraph G 2.3
- 2.4 Date

The date on which the person certify the lawful possession of the firearm(s) must be recorded in paragraph G 2.4.

- 2.5 Signature of applicant
- The signature of the person who is in lawful possession of the firearms must be recorded in paragraph G 2.5.
- 2.6 Place

The city/town must be recorded in paragraph G 2.6.

- SECTION H: SIGNATURE OF APPLICANT
 - (Sign only where applicable)

Signature

1.

3.

1.52

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

Photo

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

Fingerprint

The thumb print of the applicant must be recorded in paragraph H3

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 H 4.

5. Date

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

6. Place

7.

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

PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

Name of police official in block letters 7.1

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

Persal number of police official 7.2

The SAPS persal number of police official who deal with application must be recorded in paragraph H 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 H 7.3.

7.4 Signature of police official

The signature of police official who deal with the application must be recorded in paragraph H 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 H 8.1.

8.2 Persal number of witness

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

8.3 Rank of witness

The rank of the witnessing police official must be recorded in paragraph H $8.3\,$

8.4 Signature of witness

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

SECTION I: 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 I 1.

2. Identity/Passport number of interpreter

The identity/passport number of the interpreter must be recorded in paragraph 1 2.

3. Residential address

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

4. Code

The postal code of the residential address of the interpreter must be recorded in paragraph 14.

5. Postal address

The postal address of the interpreter must be recorded in paragraph 1.5.

6. Code

The postal code of the postal address of the interpreter must be recorded in paragraph 16.

7. Telephone number

- Home: The home telephone number and the dialling code of the interpreter must be recorded in paragraph 18 (for example: (012) 667 1923).
- Work: The work telephone number and the dialling code of the interpreter must be recorded in paragraph I 9 (for example: (011) 57 7913).

10. Cell phone number

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

11. Fax

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

12. E-mail address

The e-mail address (if applicable) of the interpreter must be recorded in paragraph I 12.

13. Translated from (language)

The translated from language to a language understandable to the applicant must be recorded in paragraph I 13 (for example: English to Zulu).

14. Date

The date on which the interpreter supported the applicant must be recorded in paragraph [14, _______

15. Signature of interpreter

The signature of the interpreter who supported the applicant must be recorded in paragraph I 15.

16. Place

18.

1.3

The city/town where the interpreter supported the applicant must be recorded in paragraph I 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 1 17.

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 I 18.

SECTION J: PARENTAL CONSENT IN CASE OF A MINOR

The required answer must be indicate with "X" in paragraph J 1.

For example:

Recommended	x	Not recommended	

2. Name and surname of parent/guardian

The name and sumame of the applicant's parent/guardian to give permission that the applicant may apply must be recorded in paragraph J 2.

3. Identity/Passport number of parent/guardian

The identity/passport number of the applicant's parent/guardian to give permission that the applicant may apply must be recorded in paragraph J 3.

4. Date

The date on which permission was given must be recorded in paragraph J 4.

5. Signature of parent/guardian

The signature of the parent/guardian must be recorded in paragraph J 5.

6. Place

The city/town where permission was given must be recorded in paragraph J 6.

GOVERNMENT GAZETTE, 27 MARCH 2003

SECTION K: IN CASE OF NOMINEE/AUTHORIZED PERSON

Name and surname of nominee/authorized person 1.

> The name and sumame of the nominee/authorized person must be recorded in paragraph K 1.

2. Identity/Passport number of nominee/authorized person

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

3. Date

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

4. Signature of nominee/authorized person

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

Place 5.

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

SECTION L: FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER

- RECOMMENDATION WITH REGARD TO THE APPLICANT 1. (Indicate with X)
- 2. The following recommendation must be indicated with "X" in paragraph L 2.

For example:

Recommended X Not recommended

2.1 Motivation

The motivation regarding the application must be recorded in paragraph L 2.1.

2.2 Recommended conditions

The recommended conditions regarding the application must be recorded in paragraph L 2.2.

3. Name of Designated Firearms Officer in block letters The initials and sumame (in block letters) of the Designated Firearms Officer that made recording endation must be recorded in paragraph L 3.

4. Date

6.

The date on which the Designated Fireann Officer made the recommendation must be recorded in paragraph L 4.

Rank of Designated Firearms Officer in block letters 5.

The rank of the Designated Firearms Officer (in block letters) that made the recommendation must be recorded in paragraph L 5.

- Place The cityfown where the Designated Firearms Officer made the recommendation must be recorded in paragraph L 6.
- Signature of Designated Firearms Officer 7.

The signature of the Designated Firearms Officer that made the recommendation must be recorded in paragraph L 7.

8. 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 L 8.

SAPS 179



SOUTH AFRICAN POLICE SERVICE

APPLICATION FOR A TEMPORARY AUTHORIZATION TO POSSESS A FIREARM [Section 21 of Firearms Control Act, 2000 (Act No 60 of 2000)]

OFFICIAL DATE STAMP	A. FOR	OFFICIA	L USE	BY TH	E PO DN 15	LICE ST		l S	
	¹ Application referen	nce no	Π						
DATE RECEIVED B. FOR OFFICIAL USE EY	POLICE STATION WH	ERE AP	PLICA	TION IS	REG	EIVED			
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⁹ Signature of deciding officer	Persal number C C		I - I	¹¹ Narr		lock lette	<u>I+:::</u>	Date	
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⁹ Signature of deciding officer	Persal number C C			¹¹ Narr		lock lette	<u>I+::</u>	ate	
⁹ Signature of deciding officer ¹² Application for temporary authorization refused	Persal number C C		Reason	¹¹ Narr		lock lette	rs		
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Rifle	Shotgun	Handgun		ombination
Other, specify (armament/ indeterminable design type)		a reconstruction of the second second		JUDINATION
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STAATSKOERANT, 27 MAART 2003

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Page 3 of 7

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GOVERNMENT GAZETTE, 27 MARCH 2003

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GOVERNMENT GAZETTE, 27 MARCH 2003

	FICIAL DEALING WITH APPLICATION	SAPS
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	7.4	
Rank of police official	Signature	of police official
PARTICULARS OF WITNESS		
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STAATSKOERANT, 27 MAART 2003

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SAPS Firearm surrendering form

SOUTH AFRICAN POLICE SERVICE

SURRENDERING OF FIREARM ITEM(S) FORM [Section 139(4) of Firearms Control Act, 2000 (Act No 60 of 2000)]

	OFFICIAL DATE STAMP	A. FOR OFFI WHERE	CIAL US	E BY THI PLICATION	E POLICE	STATIC	N S	
		¹ General firearm transact register number	tions					
	DATE RECEIVED	2 				,	Ĩ	
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2	JURISTIC PERSON'S DETAILS							
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Page 2 of 4

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GOVERNMENT	GAZETTE,	27 MARCH 2003
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Е. Р <i>і</i>	ARTICULARS OF FI	REARM ITEM THAT IS TO ARTICULARS OF FIREARM	DBESURRENDER	
	(1)	(2)	(3)	(4)
Туре				
Calibre				
Make				
Model				
Firearm component type:				
Barrei serial number				
Frame serial number				
Receiver serial number				
PARTICULARS OF PARTS	(1)	(2)	(3)	(A)
Description of part		ter i i i i i i i i i i i i i i i i i i i		Viences V
Associated firearm make				
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Quantity			r and a second sec	
		<u>V 10 sta</u>		
F. SI	GNATURE OF PER	SON SURRENDERING (S	ign only where applicable)	
		2 Date		M M - D
lame of person surrendering in bloc	k letters			
			2	
Signature of person surrendering		4 Place	2.4 5 7 9	
			en de la companya de	and a set of the set of
G. (Th	s section must <u>only</u> be o	completed if the surrendering p	erson cannot read or write)	
1.4		2 Date	CCYY-	MM-D
R				
T		3		
P		Name	of person surrendering in blo	ock letters
		4 Place		
Right thumb print of person surrende	enng			
Right thumb print of person surrende		APPLICATION		
PARTICULARS OF POLICE OFFI	CIAL DEALING WITH	5.2	umber of police official	-
	CIAL DEALING WITH	5.2 Persai r	umber of police official	-
PARTICULARS OF POLICE OFFI	CIAL DEALING WITH	5.2 Persai r 5.4	·] -]]

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STAATSKOERANT, 27 MAART 2003

No. 24599 159

SAPS Firearm surrendering form

PARTICULARS OF WITNES	S												
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Rank of witness			6.4 	Cianatur									
				Signature	e of wr	iness	2.						
H. (This sec	PARTICU	LARS OF e applicant c				runde	erstan	d this c	locume	nt)			
Name and surname of interp	reter												
Identity/Passport number of i	nterpreter				Τ	Τ				Τ	Τ	Τ	Τ
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Cell phone number				¹¹ Fax		. ()						
E-mail address			÷.	1. A.			1.00						
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1.	IN CASE OF NO	MINEE/AU	ТНО	RIZED	PERS	ON							
Name and sumame of nomin	ee/authorized person	,								<u> </u>			
Identity/Passport number of n	ominee/authorized person				Τ	Τ				Τ	Τ		
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· · ·													
			6	Place									
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Page 4 of 4

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SAPS Application for accreditation association

SOUTH AFRICAN POLICE SERVICE

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APPLICATION FOR ACCREDITATION AS AN ASSOCIATION [Section 8 of Firearms Control Act, 2000 (Act No 60 of 2000)]

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

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Page 1 of 8

SAPS Application for accreditation association

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- 1 As a sports-shooting and hunting association
- 2 As a sports-shooting
- 3 As a hunting association
- 4 As a collector association
- 5 Other (submit description of association)

E. PARTICULARS OF APPLICANT

1 NATURAL PERSON'S DETAILS

SA citizen		•No	n-SA	citize	n with	perr	naner	nt res	idanc	9											
Identity number of	natura	i pers	on	·· .	. 44		- 22							-			T	-		T	-
Surname																1.5	Initi	als			
Full names																					_
Date of birth	С	0	Y	Ŷ	•	М	м	-	D	D	1.8	Age	an a			1.9	Gend	er	Male	F	e
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	_																1.11 Co	ode			
Postal address			T														<u></u>	<u></u>			
		_	<u> </u>								_						1.15 C	ode		Τ	-
Trade of profession	1 ¹									1.15	lf s	elf-en	nploye	ed, spe	cify						-
Name of employer	compa	any				Ι		1	Γ	T	T		Γ				T			Τ	
Business address	dre:							<u> </u>	1			L		<u>ن</u> ــــــــــــــــــــــــــــــــــــ	<u>`</u>			J.,			-
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Cell phone number											1.2	s Fa	×	3 3 1	}						
E-mail address	12										- L										-
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Marital status (Indi	cate wi	th X)																			
Single			M	arrie	d		T		Dive	birced				Ń	/idow		,	$T_{2,2K}$	Widow	er	
Other (specify)	1							1.1.1.1.1							1993 - 1997			0,10,7,224	1920 - 1920 -		÷

 Type of identification (Indicate with X)

 3.2
 SA identity

 Passport

 3.3
 Identity number of spouse/partner

 3.4
 Passport number of spouse/partner

 3.5
 Name and surname

In the case of a non-SA citizen proof of permanent residence must be submitted

GOVERNMENT GAZETTE, 27 MARCH 2003

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SAPS Application for accreditation association

4	JURISTIC PERSON'S DETAIL	s																		
4.1	OTHER BODIES (eg body of c	orporat	e, closed	i corp	oratior	n or ca	ompar	ıy)												
4.2	Registered company name																			
4.3	Trading as name	<u> </u>																		
4.4	FAR number			Τ				T	Τ	<u> </u>		[Τ	ſ	Γ	Τ	
4.5	Company registration or CC nu	imber								<u> </u>						1-	1	<u>†</u>		+
4.6	Postal address		I		<u> </u>						!	L	. i	L	L	1	<u> </u>	<u> </u>	- 1	<u> </u>
														4.7 (Cade			Γ	Τ	T
4.8	Business address													4.9	20-5	10701	 1	T	 	
4.10	Business telephone number	4.10.1		T		_			·		4.10	² Fax	5 . Sa (s)		Code		L			
4.11	E-mail address	<u>.</u>	VVUIN									- ax		L						
4.12	Identity number of responsible	L	art a Sarahas		ing to a				—	<u> </u>	<u> </u>			<u> </u>	<u> </u>	1	T	<u> </u>	T	1
4,13	Cell phone number		<u></u>	20				ł		L	<u> </u>		L			<u> </u>	L		Ŀ	<u> </u>
		<u> </u>																		
4.14	Particulars of main address (He	ead Off	ice)					، بندر این کرد بندیک بازی در اخراف												
4.15	Business address	1																		
									······						^{4.16} C	ode				
4.17	Postal address													- 15			·		<u> </u>	
		.								1. A. T. A.				14.74	4.18 C	ode]]
4.19	Business telephone number	4.20	Nork	. ()				4.21	Fax		()							
1.22	E-mail address	1																		
5	RESPONSIBLE PERSON'S D	ETAILS	,																	
5.1	Responsible person (full name	and su	mamø)				<u>-</u>													
5.2	Type of identification (Indicate w	ith X)	۵ (۲۰ ۲۹ (۲۰ ۲۰۰۰) ۱۹۹۵ - ۲۰۰۱ ۱۹۹۵ - ۲۰۰۱					SA identi	ity					Pa	sspor	ťnum	ber			
5.3	Identity/Passport number of res	sponsib	le persor	1					ľ	T				Γ		Γ				Γ
5.4	Cell phone number										•			•	<u> </u>			<u> </u>	<u> </u>	
5.5	Physical address																			
															^{5.6} C	óde.			Τ	Τ
5.7	Postal address																<u> </u>	·		
															^{5.8} C	ode				
6	Type of competency certificate																			
7	Date of issue C C Y	Y	- M	м		D	D	⁸ Expi	ny date	સંદર્ભ ર	с	С	Y	Y		м	м	<u> </u>	Гр	
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•	OTHER DETAILS																			
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	HAVE YOU EVER BEEN CON COMPETENCY CERTIFICATE	WASI	SSUED	(India	cate with	=(3) 1 h X):				i cu il	v UR	001	שטוב			TRICA	SIN	С <u>Е</u> .Ү	UUR	
	YES	NO			If yes	s, sub	mit fu	II details					3.57 2							
.1	¹ Police station								9.1.2	CA	S/Cas	e ກນາ	ńber							
.3	Charge								9.1.4	<u></u>	a second									
.5	² Police station								9,1,6	CA	S/Cas	e nor	nber						-	
1.7	Charge								-	Res			- - 948]						

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STAATSKOERANT, 27 MAART 2003

YES	NO	If yes, submit full deta	lls
¹ Police station			9.22 CAS/Case number
² Police station			9.2.4 CAS/Case number
	ILIGENCE OPENED AND		GARD TO THE STOLEN/LOST FIREARM SINCE YOUR
YES	NO	If yes, submit the follo	wing details
¹ Police station			9.3.2 CAS/Case number
Charge			
² Police station			9.3.5 CAS/Case number
Charge			
HAVE YOU EVER BEE (Indicate with X)	EN DECLARED UNFIT TO	POSSESS A FIREARM S	INCE YOUR COMPETENCY CERTIFICATE WAS ISSUE
YES	NO	If yes, submit full deta	e sent sent fre son to the first of the sent sent sent sent sent sent sent set of the provide sent sent sent s
Police station			9.4.2 CAS/Case number
Charge			
Date as from			9.4.5 Period
² Police station			3.4.7 CAS/Case number
Charge			
Date as from			9.4.9 Period
IS THERE ANY CASE	PENDING AGAINST YOU	I? (Indicate with X)	
YES	NO	If yes, submit full deta	ills
¹ Police station			9.5.2 CAS/Case number
Charge			
² Police station			9.5.5 CAS/Case number
Charge			
HAVE ANY FIREARM((Indicate with X)	S) IN YOUR POSSESSIO	N EVER BEEN FORFEITE	D SINCE ISSUING OF YOUR COMPETENCY CERTIFIC
YES	NO	If yes, submit the follo	wing details
¹ Police station			
Circumstances			
² Police station			
Circumstances			
MOTIVATION OF PUR	POSE FOR WHICH ACC	REDITATION IS REQUIRE	D.
••••••			

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SAPS Application for accreditation association

Page 4 of 8

GOVERNMENT GAZETTE, 27 MARCH 2003

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	SAPS Application for accreditation association
9.2	DESCRIPTION OF THE MAIN PURPOSE OF THE BUSINESS
9.3	PARTICULARS OF HOW REGISTERS WILL BE KEPT
9.4	NUMBER OF CURRENT MEMBERS REGISTERED
14	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
ι	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)
14.1	Name and sumame of current owner/authorized person
14.2	Identification number, of current owner/authonized person
14.3	Designation - D D D
14.5	14.6 Place
	Signature of current owner/authorized person

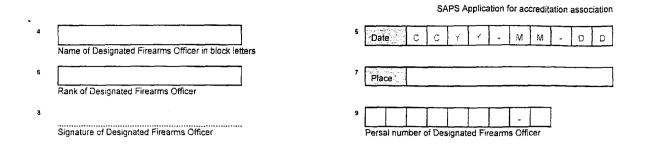
SAPS Application for accreditation association

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GOVERNMENT GAZETTE, 27 MARCH 2003

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