

## 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 IN THE DEALERS', MANUFACTURERS' OR GUNSMITHS' LICENCE

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

OFFICIAL DATE STAMP		OFFICIAL US				N	
	<sup>1</sup> Application referen	ice No					
		,					•
DATE RECEIVED							
B. FOR OFFICIAL USE BY PO	OLICE STATION WHER	E THE APPL	ICATION	IS RECE	EIVED		
Province							
Area							
Police station							
Component code							
Firearm applications register reference No	SAPS 86 NO			YEAR			
c. FOR OFFICIAL US	SE BY THE CENTRAL F	IDEADME D	ECISTED	(CED)			
<sup>1</sup> Outstanding/Additional information required	SE BY THE CENTRAL P	TREAKIVIS K	EGISTER	(CFK)			
3							
			1 1				
-   -   <sup>2</sup> P	'ersal number	-		-	3	Date	
<sup>4</sup> Signature of police official			<sup>5</sup> Name	in block	letters		
<sup>6</sup> Application for temporary authorization approv	red (Indicate with an X)						
			1				
	ersal number	-		-	8	Date	
<sup>9</sup> Signature of CFR officer	10 Officer code		<sup>11</sup> Name	in block le	etters		
12 Application for temporary authorization refuse							
		<del> </del>		<u> </u>	15	5.1	
	Persal number	-		<u> </u>		Date	
<sup>16</sup> Signature of CFR officer	17 Officer code		<sup>18</sup> Name in	block let	ters		

	DSp	ecify the type o	PAR of temporary	TICUL authori	ARS O	F AP	PLICA being	NT app	blied for (Indi	cate with a	n X)				
1 2 3 4 5 5 6 6 7 8 9	To trade in firearms and ammu To trade in ammunition To manufacture firearms To manufacture ammunition To conduct business as a guns JURISTIC PERSON'S DETAIL Registered company name Trading as name FAR number	unition													
10	Postal address		1 1	1	1	Į .									
12	Business address									<sup>11</sup> Posta			 		
14	Business telephone number	<sup>14.1</sup> Work	( )				14.2 F	ax	( )	1 0312	ii Code				
15	E-mail address														
16	Responsible person (full name	and surname)													
17	Type of identification (Indicate v	with an X)		SA citiz	zen				Non-SA c	itizen with	perman	ent res	idence	*	
18	Identity number of responsible	person							-		-			-	
19	Cellphone number														
20	Physical address														•
										<sup>21</sup> Post	tal Code				
22	Postal address														
24										<sup>23</sup> Post	tal Code				
	STATE THE REASON(S) FOR	THE APPLICA	ATION FOR	ATEM	PORAR	Y AU1	HORIZ	ZATI	ION						
25	Type of Existing licence (Indicate with an X)		in firearms	s and		То	trade	in a	mmunition			nanufa firearn			
	To manufacture am							То	conduct bi	usiness a					
26	Licence number														
27	Date issued					28	Expiry (	date							
29	PHYSICAL ADDRESS OF TH	E PROPOSED	PREMISES	ON W	нісн ві	JSINE	SS WI	LL	BE CONDU	CTED					
30	Address									31 _					
										J' Po	stal Code	9			1

<sup>\*</sup> In case of a non-SA citizen proof of permanent residence must be submitted.

l	WHAT IS THE CLASSIFICATION OF THE PROPOSED PREMISES (EG FARM, HOUSE, SMALLHOLDING, PRIVATE RESIDENCE, COMMERCIAL, ETC)
	DESCRIBE THE PREMISES WITH REFERENCE TO THE SITUATION AND THE SURROUNDING BUILDINGS
	DESCRIBE THE ALARM SYSTEM
	LOCATION AND PARTICULARS OF THE SAFE OR STRONGROOM IN WHICH STOCKS OF FIREARMS AND AMMUNITION WILL BE KEPT
	KEPT
	KEPT
	KEPT
	KEPT
	DESCRIBE THE BURGLAR PROOFING
	KEPT
	DESCRIBE THE BURGLAR PROOFING

DECLARATION BY APPLICANT

39

I am aware that it is an offence in terms of section 120 (9)(f) of the Firearms Control Act, 2000 (Act No 60 of 2000), to make a false statement in this application.

E.	SIGNAT	URE OF APPLICANT	T (Sign only if applicable)
	<ul> <li>The photo must be the size of a standard pass.</li> <li>The photo must be a full front view of the head applicant.</li> <li>The background of the photo must be plain.</li> <li>The applicant may not be wearing a hat or surphotograph.</li> <li>The applicant's name and identification number on the back of the photograph before it is affix form.</li> <li>The applicant must sign in black ink.</li> <li>The signature may not exceed the border.</li> <li>The whole finger must be pressed down on the</li> </ul>	sport photograph. d and shoulders of the  nglasses on the  er must be written ted on the application  the sheet.	PHOTO
2	Signature	6	Fingerprint designation  3  Date
vame	e of applicant in block letters	7	Place
Name	e of police official in block letters of police official in block letters	8.2	Persal number of police official
Name	e of witness in block letters of witness in block letters	9.2 9.4 ARTICULARS OF INTE	Persal number of witness  Signature of witness
F.			
F.			or write or does not understand the content of this form.)

3	Residential address										
							<sup>4</sup> Posta	al Code			
5	Postal address						I				
-							<sup>6</sup> Post	al Code			
7	Telephone number	7.1 Home	( )		7.2 Work	(	)				
8	Cellphone number				<sup>9</sup> Fax	(	)				
10	E-mail address										
11	Interpreted from (language)				to						
				12	Date			-	T   -		
						1 1	1	1 1			
13				14	Place						
	Signature of interpreter		<del></del>								
15			<b>一</b>	16				-			
	Rank of police official in block let	tters(if applica	able)	•	Pe	rsal numb	er of pol	ice official	l(if applica	ble)	
	G. FOR OFFICI	AL USE BY	THE DESIGNATED	FIREARM	IS OFFICER	Z/STATIC	ON COM	MISSIO	NER		
1		R	ECOMMENDATION RE	GARDING	THE APPLIC	ATION					
	Reco	mmended	ECOMMENDATION RE	OARDINO	THE ALL EIG		ecommer	nded			
1.1	Report of inspection on premis					110113	Joonnine.	lucu			
1.2	Additional conditions recomme	nded									
										•••••	
										•••••	

		SAPS 518(b)
	3	Date
Name of Designated Firearms Officer/Station Commissioner in block letters		
	5	Place
Rank of Designated Firearms Officer/Station Commissioner in block letters		
	7	
0		
Signature of Designated Firearms Officer/Station Commissioner		Persal number of Designated Firearms Officer/Station Commissioner