

Permit No. Expiry Date 

Application for A Permit to Acquire a Pistol for Sport or Target Shooting

PERSONAL DETAILS

1. Licence No.

2. Surname

3. Given Names

4. Age

Day month year

Date of Birth

5. Sex

Male Female

6. Home Address

(Do not enter post box numbers)

Post Code

7. Postal Address

(If same as home address write "as above")

Post Code

8. Telephone Number

(include STD area code)

Home

Work

Facsimile

PISTOL DETAILS

9. Type of Pistol Applied for (Tick one box)

H1

H2 (air pistol)

10. Details of Pistol

Make

Model

Capacity

Serial Number (if known)

Barrel Length

Calibre

Is this a prohibited pistol?

Yes No

If so, please attach an application for Approval for a prohibited pistol.

11. Nominated Discipline/s

Metallic Silhouette

Western (Single) Action

ISSF (Inc Service Pistol)

Black Powder

Action Match

IPSC

Air Pistol

Practical Pistol

Other (please describe)

12. Need for acquiring a pistol – supply as much information as possible as to why pistols already owned will not meet this need.

Name of Dealer:

DECLARATION

I hereby declare that my storage facilities comply with the provisions of the Firearms Act 1996, and all the particulars given by me in this application are true and correct.

Warning: You are reminded that the supply of false information may render you liable to prosecution and the cancellation of any licence, permit or registration granted under the Firearms Act 1996.

Signature of Applicant

Application Date

Day Month Year

Please Note:

All firearms transactions must be conducted through a licensed firearms dealer by way of a Permit to Acquire. A permit to acquire a firearm may only be granted after 28 days. A permit is in force from the date of issue until a firearm is purchased or for a period of 90 days only, whichever occurs first, bearing in mind the permit, once issued cannot be extended beyond 90 days.

CLUB ENDORSEMENT

I certify that the pistol is required for: (Discipline)

Signature of Club Office Bearer

Full Name

Position held at Club

Club Details

RECEIVING OFFICER

Name

Signature

Lodgement date of application

Day Month Year

Receipt Number

Fee

APPROVED/NOT APPROVED (For Firearms Services use only)