

Firearms Licence Application

Firearms Act 1996

Licence No./s

IMPORTANT: It is an offence for a person, in making an application or providing information, to either make a statement knowing it to be false or misleading or to omit any matter knowing that without that matter the application or information is false or misleading. Doing so is both an offence pursuant to Section 126 of the *Firearms Act 1996* and a basis to refuse an application for a firearms licence or cancel an existing firearms licence. Penalty: Fine not exceeding 100 penalty units or imprisonment for a term not exceeding 3 years, or both.

Personal details:

1 Surname 2 Given Names

3 Age Date of Birth 4 Sex

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Male Female Other



TASMANIA POLICE FIREARMS SERVICES

5 Home address

Street number and name

Suburb State Postcode Country

6 Postal address (if different from home address)

Street number and name

Suburb State Postcode Country

7 Contact details

Home Mobile

Email

!
Action required if applicable

C
Please read

8 Are you known or have you ever been known by any other names? Yes No

Other names and reason for changing names

Surname and given names	Reasons for changing name

9 Have you ever lived in another Australian State or Territory or overseas?

Yes specify below state or country and the period in which you resided there No go to next question

State/Country	Time period

Time period

14 Please indicate the categories and your reason for requiring a firearms licence (tick appropriate boxes)

Category	Tick box	Type of firearm	1	2	3	4	5	6	7
A	<input type="checkbox"/>	Air rifle							
	<input type="checkbox"/>	Rimfire rifle (other than self-loading)							
	<input type="checkbox"/>	Shotgun other than pump action or self-loading							
	<input type="checkbox"/>	Shotgun and rimfire rifle combinations							
B	<input type="checkbox"/>	Muzzle loading firearm						<input checked="" type="checkbox"/>	
	<input type="checkbox"/>	Centre fire rifle (other than self-loading) Shotgun and centre fire rifle combinations							<input checked="" type="checkbox"/>
C	<input type="checkbox"/>	Self-loading rimfire rifle with a magazine capacity of no more than 10 rounds							
	<input type="checkbox"/>	Self-loading shotgun with a magazine capacity of no more than 5 rounds	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	Pump action shotgun with a magazine capacity of no more than 5 rounds							
D	<input type="checkbox"/>	Self-loading centre fire rifle							
	<input type="checkbox"/>	Self-loading shotgun with a capacity of more than 5 rounds							
	<input type="checkbox"/>	Pump action shotgun with a capacity of more than 5 rounds	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	Self-loading rimfire rifle with a magazine capacity of more than 10 rounds							
H	<input type="checkbox"/>	Pistol		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
	<input type="checkbox"/>	Air pistol							

Genuine Reason Legend

- | | |
|---|---|
| 1. Sport or target shooting | 5. Animal welfare |
| 2. Recreational hunting or vermin control | 6. Business or employment as a firearms dealer, security agent or security guard, paintball operator or commercial fisher |
| 3. Primary production | 7. Firearms collection |
| 4. Animal population control | |



Action required if applicable



Please read

History



IMPORTANT: This information is required pursuant to Division 5 of the Firearms Act 1996. For more information about why this information is required visit fas.police.tas.gov.au.
If you answer yes to any of the history questions, you must include all information in relation to the matter to support your application.

15

Have you ever held or applied for a firearms licence in any other Australian state or territory or overseas?

- Yes - specify below state, territory or country licences held in
- No - go to next question

State or Territory	Licence number	Expiry date										
		<table border="1"> <tr> <td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y			



16

Have you ever been refused a licence/permit for a firearm? (tick one box)

- Yes - specify below
- No - go to next question

17

Have you ever had a firearm licence/permit cancelled? (tick one box)

- Yes - specify below
- No - go to next question

18

In Tasmania or any other State or Territory of Australia (or any other country), have you ever (tick applicable boxes)

a. been charged with an offence or crime?	Yes	No
b. been found guilty or pleaded guilty to any offence or crime?	Yes	No
c. been sentenced to a term of imprisonment or probation?	Yes	No
d. had a Restraint Order, Police Family Violence Order or Family Violence Order made against you protecting another person or persons?	Yes	No
e. been protected from a person by a Restraint Order, Police Family Violence Order or Family Violence Order?	Yes	No
f. been subject to a Firearms Prohibition Order in Australia, or an equivalent in any other country?	Yes	No
g. been a party involved in a Child Protection Order or National Personal Protection Injunction (or similar) in any state or territory of Australia, or an equivalent order in another country?	Yes	No



Action required if applicable



Please read



If you have answered yes to any of the above questions in Section 16, you must provide all relevant information in the *court appearance details* section on **page 10**.

Mental and Physical Health

19

Have you ever experienced, been diagnosed with or required treatment for any of the following (tick any applicable box)

a. a mental health condition?	Yes	No
b. a neurological condition (including but not limited to ADHD, Autism Spectrum Disorder, Brain Injury, Dementia, Epilepsy, Fainting, Insomnia, Learning Disability, Migraine, Motor Neuron Disease, Multiple Sclerosis, Narcolepsy, Parkinson's Disease, Seizures, Stroke, Tourette Syndrome)?	Yes	No
c. an intellectual disability?	Yes	No
d. a physical disability?	Yes	No
e. a sensory disability (including but not limited to sight or hearing impairment)?	Yes	No
f. alcohol or drug related problems?	Yes	No
g. any other physical or mental condition that may impede your ability to exercise reasonable and responsible control over a firearm?	Yes	No

Have you ever

h. attempted suicide or self-harm?	Yes	No
i. attended an appointment with a psychologist or psychiatrist?	Yes	No
j. been subject to a mental health plan?	Yes	No



NOTE: If you answered yes to any of the "Mental and Physical Health" questions, you must include all information in relation to the matter with your application. Information will generally be required from a medical practitioner, such as a specialist in the relevant area or your General Practitioner. Firearms Services can provide you with a document to take to a medical practitioner to guide the information they provide.

20 Identification

Please supply details of your identification totaling the requested 100 points

Identification	Score	
Main items (only one item permitted per applicant)		
Passport (original document or certified copy must be sighted)	70	
Citizenship Certificate (original document or certified copy must be sighted)	70	
Birth Certificate (original document or certified copy must be sighted)	70	
Other items		
Licence issued under a law (eg. drivers licence, current firearm licence)	40	
Employment ID – ID card issued by employer (name and address only)	35	
Employment ID – ID issued by employer (name only)	25	
Letter from employer (within last two weeks) confirming name and address	35	
Rates notice	35	
Credit / Debit Cards / Passbooks (only one allowed per institution)	25	
Medicare Card	25	
Membership Card – club, union or trade, professional bodies	25	
Membership Card – educational institutions	25	



NOTE: Your score must total at least **100 points** in order to satisfy the requirements of identification. Refer to the *Acceptable Methods of Identification form* at fas.police.tas.gov.au/obtaining-a-licence/acceptable-identification-methods/ for more information.



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Action required if applicable



Please read

Genuine reason

Please only answer the genuine reason categories which you ticked as applicable in **question 14** on **page 3**.

1. Sport or target shooting

NOTE: When applying for a Category B licence, you may be required to provide evidence proving your need to possess or use a firearm of that category.

21 Where your reason for possessing or using a firearm is a sport or target shooting, of which approved shooting organisation/s are you a member? (specify below)

Shooting organisation name

Membership number

Shooting organisation name

Membership number

2. Recreational hunting or vermin control

22 Where your reason for possessing or using a firearm is recreational hunting or vermin control, what type/s of animal or vermin will you be shooting?

NOTE: You are required to submit a 'permission to shoot' document from the property owner to support your application. The application must include the name of the owner, address of the property and the specific type of animal or vermin.

23 On what land will you be shooting the specified animal or vermin?

Property address

Property owner

Phone number

Property size

Property address

Property owner

Phone number

Property size



Action required if applicable



Please read

3. Primary production

NOTE: Where your reason for possessing or using a firearm is primary production and you are applying for a Category C licence, attach evidence proving that your need for this licence cannot be met by a Category A firearm licence or a Category B firearm licence, or by any other means.

24 Where you are applying for Primary Production, you must provide details of the business.

Name of business	ABN/ACN
Nature of business	

4. Animal population control

NOTE: A Statutory Declaration is required proving your intention to possess or use a firearm solely for the purpose of primary production.

25 If you are applying for animal population control, what is the nature of your business and by whom are you employed? (specify below)

NOTE: If you are applying for a firearms license for animal population control, and have provided an answer for **question 25** above, please provide the requested documentation below when submitting your application.

Attach proof of your profession in the business of animal population control.

If you are applying for a Category D licence for animal population, you must be either:

- a professional shooter, whose principal or only occupation is the business of controlling vertebrate pest animals; or
- a person employed in or by, or authorised by, a prescribed government agency that has functions relating to vertebrate pest animals.

Evidence of your occupation or employment must accompany your application for a Category D licence, See information Sheet 17 for further information.

If you are applying for a licence in animal welfare, you must provide evidence proving your genuine need to possess or use a firearm of that category. Any applicant whose genuine reason for possessing or using a firearm in animal welfare must be a prescribed person, as per Section 42 of the Firearms Act 1996.



Action required if applicable



Please read

6. Business or employment as a firearms dealer, security agent or security guard, paintball operator or commercial fisher

26 Where your reason for possessing or using a firearm is for the employment as a Security Guard or Security Agent, complete the following:

27a. Security Guard

Security Guard licence number	Expiry date										
	<table border="1"> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table>			/			/				
		/			/						
Employer name	Employer address (Do not enter post box numbers)	Postcode									
		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td> </tr> </table>									

27b. Security Agent

Do you require a firearms licence on behalf of a corporation? (tick one box)

Yes No Go to question 38

Corporation name

Corporation address in Tasmania (Do not enter post box)

Postcode

ACN Number

What is your position in the Corporation?

Security Agent licence number	Expiry date	Court issued										
	<table border="1"> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table>			/			/					
		/			/							

7. Firearms collection

27 Where your reason for possessing a firearm is for firearms collection, complete the following:

Name of Society

Corporation address in Tasmania (Do not enter post box)

Postcode

Telephone number of Society

Email address

Membership number

Expiry date

		/			/				
--	--	---	--	--	---	--	--	--	--

28 Provide proof of your current membership of an approved collection society.

29 What is the purpose for which you intend to collect firearms?



Action required if applicable



Please read

30 Firearms Storage

Do you intend to store firearms at your residing address?

Yes No

If no, please provide the following information/details:

Storage Address

Licence No



NOTE: You should not be in possession or storing firearms at your residing or nominated storage address unless you are a Firearm Licence holder.



Applicant declaration

I(insert name)

hereby declare that to the best of my knowledge and belief, all of the information given in this form is correct in every particular. I acknowledge that prior to the making of this application I have read the information regarding the requirements in relation to the storage and safety of firearms.

Signature

Date



D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

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.



Action required if applicable



Please read

**32 Has the applicant attached sufficient proof of the genuine reason?
(tick one box)**

Yes No *Do not proceed past this point*

**Has the applicant produced identification totalling the required
100 points in accordance with the Financial Transaction Reports Act
1988 (refer to information sheet) (tick one box)**



TASMANIA POLICE FIREARMS SERVICES

Yes No *If no, do not proceed past this point* Lodgement date of application

		/			/				
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Office Location

33 Name Signature



Receipt number

Receipt fee

Concession details:

Customer Reference Number

Or

Department of Veteran's Affairs Number

*Has the applicant satisfactorily completed an approved
firearms safety course?*

Yes No



Action required if applicable



Please read



CONCESSION

Please note in order to receive a concession you must provide a copy of a current Pension, Veterans Affairs or Health care card in your name.