



SOUTH AFRICAN POLICE SERVICE

**NOTIFICATION OF CHANGE IN CIRCUMSTANCES**

Section 26(1), 38(1), 52(1) and 66(1) of the Firearms Control Act, 2000 (Act No 60 of 2000)

<b>OFFICIAL DATE STAMP</b>
<b>DATE RECEIVED</b>

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE NOTIFICATION IS CAPTURED										
<sup>1</sup> Notification reference No										

B. FOR OFFICIAL USE BY POLICE STATION WHERE THE NOTIFICATION IS RECEIVED										
1	Province									
2	Area									
3	Police station									
4	Component code									
5	General firearm transactions register number									

C. PARTICULARS OF THE HOLDER OF THE LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION										
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<b>NATURAL PERSON'S DETAILS</b>
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1.1	SA ID		Passport																	
2	Identity number of natural person							-												
3	Passport number of natural person																			
4	Surname									<sup>5</sup> Initials										
6	Residential address																			
										<sup>7</sup> Postal Code										
8	Postal address																			
										<sup>9</sup> Postal Code										
10	Telephone number		<sup>10.1</sup> Home	( )	<sup>10.2</sup> Work	( )														
10.3	Cellphone number						<sup>11</sup> Fax	( )												
12	E-mail address																			

<b>JURISTIC PERSON'S DETAILS</b>
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<b>OTHER BODIES</b>
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15	Registered company name									
16	Trading as name									
17	FAR number									
18	Postal address									

20	Business address												19 Postal Code						
															21 Postal Code				
22	Business telephone number	22.1 Work					( )	22.2 Fax				( )							
23	E-mail address																		

**RESPONSIBLE PERSON'S DETAILS**

25	Responsible person (full name and surname)																												
26	Type of identification (Indicate with an X)	SA ID							Passport number																				
27	Identity number of responsible person							-								-							-						
28	Passport number of responsible person																												
29	Cellphone number																												
30	Physical address																												
32	Postal address												31 Postal Code																
																33 Postal Code													

**DETAILS OF LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**

35	Licence, permit, certificate or authorization type	Licence, permit, certificate or authorization number	Date issued

**OTHER INFORMATION**

37	Description of change in circumstances	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>															
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38

**DECLARATION OF REPORTING PERSON**

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

**D. SIGNATURE OF REPORTING PERSON**  
(Sign only if applicable)

1

Name of reporting person in block letters

2 Date     -

3 .....  
Signature of reporting person

4 Place

**E.** (This section must be completed only if the reporting person cannot read or write.)

1

Right index fingerprint of reporting person

2 Fingerprint designation

3 Date     -

4

Name of reporting person in block letters

5 Place

**PARTICULARS OF POLICE OFFICIAL DEALING WITH NOTIFICATION**

6.1

Name of police official in block letters

6.2       -

Persal number of police official

6.3

Rank of police official in block letters

6.4 .....  
Signature of police official

**PARTICULARS OF WITNESS**

7.1

Name of witness in block letters

7.2       -

Persal number of witness

7.3

Rank of witness in block letters

7.4 .....  
Signature of witness

**F. PARTICULARS OF INTERPRETER**  
(This section must be completed only if the reporting person cannot read or write or does not understand the contents of this form.)

1	Name and surname of interpreter		<input type="text"/>													
2	Identity/Passport number of interpreter		<input type="text"/>													
3	Residential address		<input type="text"/>										4 Postal Code		<input type="text"/>	
5	Postal address		<input type="text"/>										6 Postal Code		<input type="text"/>	
7	Telephone number	7.1 Home	( )				7.2 Work	( )								
8	Cellphone number					9 Fax	( )									
10	E-mail address		<input type="text"/>													
11	Interpreted from (language)		<input type="text"/>				to	<input type="text"/>								

12 

Date						-							
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14 

Place												
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13 .....  
Signature of interpreter

15 

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Rank of police official in block letters (if applicable)

16 

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Persal number of police official (if applicable)

**G. FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER/STATION COMMISSIONER**

1 

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Name of Designated Firearms Officer/Station Commissioner in block letters

2 

Date						-							
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3 

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Rank of Designated Firearms Officer/Station Commissioner in block letters

4 

Place												
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5 .....  
Signature of Designated Firearms Officer/Station Commissioner

6 

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Persal number of Designated Firearms Officer/Station Commissioner