

B. PARTICULARS OF APPLICANT

NATURAL PERSON'S DETAILS

SA ID		Passport	
Identity number			
Passport number			
Surname			⁶ Initials
Residential address			
			⁸ Postal Code
Postal address			
			¹⁰ Postal Code
Telephone number	^{11.1} Home	()	^{11.2} Work ()
Cellphone number			¹² Fax ()
E-mail address			

JURISTIC PERSON'S DETAILS

OTHER BODIES

Registered company name			
Trading as name			
FAR number			
Postal address			
			²⁰ Postal Code
Business address			
			²² Postal Code
Business telephone number	^{23.1} Work	()	^{23.2} Fax ()
E-mail address			

RESPONSIBLE PERSON'S DETAILS

Responsible person (full names and surname)			
Type of identification (Indicate with an X)	SA ID		Passport number
Identity number of responsible person			
Passport number of responsible person			
Cellphone number			
Physical address			
			³² Postal Code
Postal address			
			³⁴ Postal Code

REPRESENTATIVE'S DETAILS

Full name and surname			
Type of identification (Indicate with an X)	SA ID		Passport number

D. FIREARM DETAILS
(Complete only if the appeal involve a firearm)

	(1)	(2)	(3)	(4)
1 Type				
2 Calibre				
3 Make				
4 Model				
Firearm component type:				
5 Barrel serial number				
6 Frame serial number				
7 Receiver serial number				

E. DETAILS OF THE CURRENT OWNER OF THE FIREARM

1 SA ID		Passport	
2 Identity number			
3 Passport number			
4 Surname			⁵ Initials
6 Residential address			
		⁷ Postal Code	
8 Postal address			
		⁹ Postal Code	
10 Telephone number	^{10.1} Home	()	^{10.2} Work ()
10.3 Cellphone number			¹¹ Fax ()
12 E-mail address			

DECLARATION BY APPLICANT/AUTHORIZED PERSON/REPRESENTATIVE

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 notice.

F. SIGNATURE OF APPLICANT (Sign only if applicable)

1		2 Date	
	Name of applicant in block letters		
3	4 Place	
	Signature of applicant		

G. SIGNATURE OF AUTHORIZED PERSON/REPRESENTATIVE

1	Name and surname of authorized person/representative	
2	Designation	3 Date
4	5 Place
	Signature of authorized person/representative	

