



SOUTH AFRICAN POLICE SERVICE

APPLICATION FOR AUTHORIZATION TO POSSESS MORE THAN 2 400 PRIMERS

Section 93 of the Firearms Control Act, 2000 (Act No 60 of 2000)

OFFICIAL DATE STAMP
DATE RECEIVED

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED										
¹ Application reference No										

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

C. FOR OFFICIAL USE BY THE DECIDING OFFICER										
¹ Outstanding/Additional information required										
² Persal number							-	³ Date		
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 40%; border-bottom: 1px dotted black; text-align: center;">⁴ Signature of police official</div> <div style="width: 60%; border: 1px solid black; height: 20px;"></div> </div>										
⁵ Name in block letters										
⁶ Application for authorization to possess approved (Indicate with an X) <input type="checkbox"/>										
⁷ Persal number							-	⁸ Date		
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 40%; border-bottom: 1px dotted black; text-align: center;">⁹ Signature of deciding officer</div> <div style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <div style="width: 40%; border: 1px solid black; height: 20px;"></div> </div>										
¹⁰ Officer code							¹¹ Name in block letters			
¹² Application for authorization to possess refused (Indicate with an X) <input type="checkbox"/>										
¹³ Reason(s) for refusal										
¹⁴ Persal number							-	¹⁵ Date		
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 40%; border-bottom: 1px dotted black; text-align: center;">¹⁶ Signature of deciding officer</div> <div style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <div style="width: 40%; border: 1px solid black; height: 20px;"></div> </div>										
¹⁷ Officer code							¹⁸ Name in block letters			

D. PARTICULARS OF APPLICANT

1 NATURAL PERSON'S DETAILS

2	SA ID		Passport	
3	Identity number of natural person			
4	Passport number of natural person			
5	Surname			⁶ Initials
7	Residential address			
				⁸ Postal Code
9	Postal address			
				¹⁰ Postal Code
11	Telephone number	^{11.1} Home	()	^{11.2} Work ()
11.3	Cellphone number			¹² Fax ()
13	E-mail address			

14 JURISTIC PERSON'S DETAILS

15 OTHER BODIES

16	Registered company name			
17	Trading as name			
18	FAR number			
19	Company registration or CC number			
20	Postal address			
				²¹ Postal Code
22	Business address			
				²³ Postal Code
24	Business telephone number	^{24.1} Work	()	^{24.2} Fax ()
25	E-mail address			

26 RESPONSIBLE PERSON'S DETAILS

27	Responsible person (full name and surname)			
28	Type of identification (Indicate with an X)	SA ID		Passport number
29	Identity number of responsible person			
30	Passport number of responsible person			
31	Cellphone number			
32	Physical address			
				³³ Postal Code
34	Postal address			
				³⁵ Postal Code

E. PARTICULARS OF FIREARM(S) FOR WHICH PERMISSION IS REQUIRED TO POSSESS MORE THAN 2 400 PRIMERS

	(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			

8 Provide reason(s) for the need to possess more than 2 400 primers for each firearm.

Firearm 1	<div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div>
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Firearm 2	<div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div>
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Firearm 3	<div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div>
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Firearm 4	<div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dotted black; margin-bottom: 2px;"></div>
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F. SIGNATURE OF APPLICANT (Sign only if applicable)

1
Name of applicant in block letters

2 Date -

3
Signature of applicant

4 Place

G. (This section must be completed only if the applicant cannot read or write.)

1
Right index fingerprint of applicant

2 Fingerprint designation

3 Date -

4
Name of applicant in block letters

5 Place

6 PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

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

7 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

H. PARTICULARS OF INTERPRETER
(This section must be completed only if the applicant cannot read or write or does not understand the content of this form.)

1 Name and surname of interpreter

2 Identity/Passport number of interpreter

3 Residential address

4 Postal Code

5 Postal address

6 Postal Code

7 Telephone number 7.1 Home () 7.2 Work ()

8 Cellphone number 9 Fax ()

10 E-mail address

11 Interpreted from (language) to

12 Date -

13
Signature of interpreter

14 Place

15
Rank of police official in block letters (if applicable)

16 -
Persal number of police official (if applicable)

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

RECOMMENDATION REGARDING THE APPLICATION

Recommended

Not recommended

Motivation

Large area with horizontal dotted lines for writing motivation.

[Empty box for name]

Name of Designated Firearms Officer/Station Commissioner in block letters

Date [][][][][] - [][][][]

[Empty box for rank]

Rank of Designated Firearms Officer/Station Commissioner in block letters

Place [Empty box]

.....
[Empty box for signature]

Signature of Designated Firearms Officer/Station Commissioner

[][][][][][][] - [][]

Persal number of Designated Firearms Officer/Station Commissioner