

# SOUTH AFRICAN POLICE SERVICE



Application for compensation

<b>INSTRUCTIONS: APPLICATION FOR COMPENSATION</b>
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**GENERAL INSTRUCTIONS**

- An application for compensation must be completed in black ink that cannot be erased.
- The application must be stamped with the official date stamp of the police station where it is received.
- The police station where the application is captured must complete Section A.
- The police station where the application is received must complete Section B.
- The Central Firearms Control Register (CFR) must complete Section C.
- The applicant must complete Sections D, E and F.
- If an interpreter was used, he/she must complete Section G.
- The Designated Firearms Officer must complete Section H.
- A person is guilty of an offence in terms of the Firearms Control Act, 2000 (Act No 60 of 2000), if he/she provides information which he/she knows is false on this application form.

**SECTION A: FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED****1. Application reference number**

The reference number that the system generated for the application after it has been captured (for example, 12945) must be recorded in paragraph A 1.

**SECTION B: FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS RECEIVED****1. Province**

The name of the province where the police station is situated (for example, Gauteng) must be recorded in paragraph B 1.

**2. Area**

The name of the area where the police station is situated (for example, Pretoria) must be recorded in paragraph B 2.

**3. Police station**

The name of the police station where the application is received (for example, Brooklyn) must be recorded in paragraph B 3.

**4. Component code**

The component code of the police station where the application was received (for example, 47) must be recorded in paragraph B 4.

**5. General firearm transactions register reference number**

The annual serial number of the firearm applications register allocated to the application (for example, 135/2002) must be recorded in paragraph B 5.

**SECTION C: FOR OFFICIAL USE BY THE CENTRAL FIREARMS REGISTER (CFR)****1. Outstanding/Additional information required**

When the police official at the CFR requests outstanding or additional information from the police station or the applicant, the required information must be recorded in paragraph C 1.

**2. Persal number**

The SAPS Persal number of the police official at the CFR who requested the outstanding or additional information must be recorded in paragraph C 2.

**3. Date**

The date on which the outstanding or additional information is requested by the police official at the CFR must be recorded in paragraph C 3.

**4. Signature of police official**

The signature of the police official at the CFR who requested the outstanding or additional information must be recorded in paragraph C 4.

**5. Name in block letters**

The initials and surname (in block letters) of the police official at the CFR who requested the outstanding or additional information must be recorded in paragraph C 5.

**6. Application for compensation approved (Indicate with an X)**

If the application for compensation is approved, the officer at the CFR who approved the application must mark paragraph C 6 with an X.

**7. Amount of compensation to be paid**

The amount of compensation to be paid must be recorded in paragraph C 7.

**8. Persal number**

The SAPS Persal number of the officer at the CFR who approved the application must be recorded in paragraph C 8.

**9. Date**

The date on which the application was approved by the officer at the CFR must be recorded in paragraph C 9.

**10. Signature of deciding officer**

The signature of the officer at the CFR who approved the application must be recorded in paragraph C 10.

**11. Officer code**

The officer code is a code allocated to each officer at the CFR who considers applications for compensation. The code of the officer at the CFR who approved the application must be recorded in paragraph C 11.

**12. Name in block letters**

The initials and surname (in block letters) of the officer at the CFR who approved the application must be recorded in paragraph C 12.

**13. Application for compensation refused (Indicate with an X)**

If the application for compensation is refused, the officer at the CFR who refused the application must mark paragraph C 13 with an X.

**14. Reason(s) for refusal**

When an application was refused, the officer at the CFR must record the reason(s) for refusal in paragraph C 14.

**15. Persal number**

The SAPS Persal number of the officer at the CFR who refused the application must be recorded in paragraph C 15.

**16. Date**

The date on which the application is refused by the officer at the CFR must be recorded in paragraph C 16.

**17. Signature of deciding officer**

The signature of the officer at the CFR who refused the application must be recorded in paragraph C 17.

**18. Officer code**

The officer code is a code allocated to each officer at the CFR who considers applications for compensation. The code of the officer at the CFR who refused the application must be recorded in paragraph C 18.

**19. Name in block letters**

The initials and surname (in block letters) of the officer at the CFR who refused the application must be recorded in paragraph C 19.

**SECTION D: PARTICULARS OF APPLICANT****1. NATURAL PERSON'S DETAILS****2. The type of identification** (Indicate with an X)**2.1 SA ID/Passport/Non-SA citizen with permanent residence\***

The applicant's type of identification must be indicated with an X in paragraph D 2.1.

\* In case of a non-SA citizen proof of permanent residence must be submitted.

**3. Identity number of natural person**

The identity number of the natural person must be recorded in paragraph D 3.

**4. Passport number of natural person**

The passport number of the natural person must be recorded in paragraph D 4.

**5. Surname**

The applicant's surname must be recorded in paragraph D 5.

**6. Initials**

The applicant's initials must be recorded in paragraph D 6.

**7. Full names**

The applicant's full names must be recorded in paragraph D 7.

**8. Residential address**

The physical address where the applicant resides must be recorded in paragraph D 8.

**9. Postal code**

The postal code of the applicant's residential address must be recorded in paragraph D 9.

**10. Postal address**

The postal address of the applicant must be recorded in paragraph D 10.

**11. Postal code**

The postal code of the applicant's postal address must be recorded in paragraph D 11.

**12. Business telephone numbers**

**12.1 Home:** The applicant's home telephone number, including the dialling code, (for example, (012) 667 1923) must be recorded in paragraph D 12.1.

**12.2 Work:** The applicant's work telephone number, including the dialling code, (for example, (011) 577 5913) must be recorded in paragraph D 12.2.

**12.3 Cellphone number**

The cellphone number (if applicable) of the applicant must be recorded in paragraph D 12.3.

**13. Fax number**

The fax number, including the area dialling code, of the applicant must be recorded in paragraph D 13.

**14. E-mail address**

The e-mail address (if applicable) of the applicant must be recorded in paragraph D 14.

**15. JURISTIC PERSON'S DETAILS****16. Registered company name**

The registered company name of the applicant must be recorded in paragraph D 16.

**17. Trading as name**

The trading as name of the company of the applicant must be recorded in paragraph D 17.

**18. FAR number**

The registration number of the company of the applicant must be recorded in paragraph D 18.

**19. Postal address**

The postal address of the applicant must be recorded in paragraph D 19.

**20. Postal code**

The postal code of the applicant's postal address must be recorded in paragraph D 20.

**21. Business address**

The physical address where the applicant conducts business must be recorded in paragraph D 21.

**22. Postal code**

The postal code of the applicant's business address must be recorded in paragraph D 22.

**23. Business telephone number**

**23.1 Work:** The applicant's work telephone number, including the dialling code, (for example, (011) 577 5913) must be recorded in paragraph D 23.1.

**23.2 Fax**

The applicant's fax number, including the dialling code, (for example, (012) 667 1923) must be recorded in paragraph D 23.2.

**24. E-mail address**

The e-mail address (if applicable) of the applicant must be recorded in paragraph D 24.

**25. RESPONSIBLE PERSON'S DETAILS****26. Responsible person (Full name and surname)**

The responsible person's full name and surname must be recorded in paragraph D 26.

**27. Type of identification** (Indicate with an X)  
**SA ID/Passport number**

The applicable type of identification must be indicated with an X in paragraph D 27.

**28. Identity number of responsible person**

The responsible person's identity number must be recorded in paragraph D 28.

**29. Passport number of responsible person**

The responsible person's passport number must be recorded in paragraph D 29.

**30. Cellphone number**

The cellphone number (if applicable) of the responsible person must be recorded in paragraph D 30.

**31. Physical address**

The physical address where the responsible person resides must be recorded in paragraph D 31.

**32. Postal code**

The postal code of the responsible person's physical address must be recorded in paragraph D 32.

**33. Postal address**

The postal address of the responsible person must be recorded in paragraph D 33.

**34. Postal code**

The postal code of the responsible person's postal address must be recorded in paragraph D 34.

**35. REPRESENTATIVE'S DETAILS****36. Name and surname**

The initials and surname of the representative must be recorded in paragraph D 36.

**37. Postal address**

The postal address of the representative must be recorded in paragraph D 37.

**38. Postal code**

The postal code of the representative's postal address must be recorded in paragraph D 38.

**39. Telephone numbers**

**39.1 Home:** The representative's home telephone number, including the dialling code, (for example, (012) 667 1923) must be recorded in paragraph D 39.1.

**39.2 Work:** The representative's work telephone number, including the dialling code, (for example, (011) 577 5913) must be recorded in paragraph D 39.2.

**39.3 Cellphone number**

The cellphone number (if applicable) of the representative must be recorded in paragraph D 39.3.

**40. Fax number**

The fax number, including the area dialling code, of the representative must be recorded in paragraph D 40.

**41. E-mail address**

The e-mail address (if applicable) of the representative must be recorded in paragraph D 41.

**42. PARTICULARS OF FIREARM LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**

**43.** The applicable type of the licence, permit, certificate or authorization must be recorded in paragraph D 43.

**44.** The applicable licence, permit, certificate or authorization number must be recorded in paragraph D 44.

**45. DETAILS OF FIREARM****46. Type**

The type of the firearm must be recorded in paragraph D 46.

**47. Calibre**

The calibre of the firearm must be recorded in paragraph D 47.

**48. Make**

The make of the firearm must be recorded in paragraph D 48.

**49. Model**

The model of the firearm must be recorded in paragraph D 49.

**50. Barrel serial number**

The barrel serial number must be recorded in paragraph D 50.

**50.1 Make**

The make of the barrel must be recorded in paragraph D 50.1.

**51. Frame serial number**

The frame serial number must be recorded in paragraph D 51.

**51.1 Make**

The make of the frame must be recorded in paragraph D 51.1.

**52. Receiver serial number**

The receiver serial number must be recorded in paragraph D 52.

**52.1 Make**

The make of the receiver must be recorded in paragraph D 52.1.

**53. OTHER PARTICULARS****54. Police station name**

The name of the police station where the firearm was surrendered or forfeited must be recorded in paragraph D 54.

**55. SAPS 13 register reference number**

The SAPS 13 register reference number of the police station where the firearm was handed in must be recorded in paragraph D 55.

**56. Case reference number**

The case reference number of the relevant police station must be recorded in paragraph D 56.

**57. Motivation for compensation**

A motivation regarding the compensation must be recorded in paragraph D 57.

**58. Expected compensation amount**

The compensation amount expected to be paid must be recorded in paragraph D 58.

**59. Amount in words**

The expected compensation amount must be indicated in words in paragraph D 59.

**60 . BANK PARTICULARS****61. Account holder's name**

The initials and surname of the account holder must be recorded in paragraph D 61.

**62. Account type**

The applicant's type of account must be recorded in paragraph D 62.

**63. Account number**

The number of the applicant's account must be recorded in paragraph D 63.

**64. Name of bank**

The name of the applicant's bank must be recorded in paragraph D 64.

**65. Branch name**

The branch name of the applicant's bank must be recorded in paragraph D 65.

**66. Bank brach code**

The branch code of the applicant's bank must be recorded in paragraph D 66.

**67. DECLARATION BY PERSON WHO IS THE LAWFUL OWNER OF THE FIREARM(S)**

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 application form.

**SECTION E: SIGNATURE OF APPLICANT**

(Sign only if applicable)

**1. SIGNATURE OF APPLICANT****2. Name of applicant in block letters**

The initials and surname (in block letters) of the applicant must be recorded in paragraph E 2.

**3. Date**

The date on which the applicant signs the application must be recorded in paragraph E 3.

**4. Signature of applicant**

The signature of the applicant must be recorded in paragraph E 4.

**5. Place**

The place where the applicant signs the application form must be recorded in paragraph E 5.

**6. SIGNATURE OF REPRESENTATIVE****7. Name of representative in block letters**

The initials and surname (in block letters) of the representative must be recorded in paragraph E 7.

**8. Date**

The date on which the representative signs the application must be recorded in paragraph E 8.

**9. Signature of representative**

The signature of the representative must be recorded in paragraph E 9.

**10. Place**

The place where the representative signs the application form must be recorded in paragraph E 10.

**SECTION F: (This section must only be completed if the applicant cannot read or write.)****1. The right index fingerprint of applicant**

The index fingerprint of the applicant's right hand must be taken by the police official in paragraph F 1, in the presence of a witness and may not exceed the border. If the applicant does not have a right index fingerprint, the index fingerprint of the left hand must be taken.

**2. Fingerprint designation**

The designation of the fingerprint (for example, right index fingerprint) must be recorded in paragraph F 2.

**3. Date**

The date on which the applicant's fingerprint was taken must be recorded in paragraph F 3.

**4. Name of applicant in block letters**

The initials and surname (in block letters) of the applicant must be recorded in paragraph F 4.

**5. Place**

The city/town where the applicant's fingerprint was taken must be recorded in paragraph F 5.

**6. PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION****6.1 Name of police official in block letters**

The initials and surname (in block letters) of the police official who deals with the application must be recorded in paragraph F 6.1.

**6.2 Persal number of police official**

The SAPS Persal number of the police official who deals with application must be recorded in paragraph F 6.2.

**6.3 Rank of police official in block letters**

The rank (in block letters) of the police official who deals with the application must be recorded in paragraph F 6.3.

**6.4 Signature of police official**

The signature of the police official who deals with the application must be recorded in paragraph F 6.4.

**7. PARTICULARS OF WITNESS****7.1 Name of witness in block letters**

The initials and surname (in block letters) of the police official who acts as the witness must be recorded in paragraph F 7.1.

**7.2 Persal number of witness**

The SAPS Persal number of the police official who acts as the witness must be recorded in paragraph F 7.2.

**7.3 Rank of witness in block letters**

The rank (in block letters) of the police official who acts as the witness must be recorded in paragraph F 7.3.

**7.4 Signature of witness**

The signature of the police official who acts as the witness must be recorded in paragraph F 7.4.



**SECTION G: PARTICULARS OF INTERPRETER**

(This section must be completed only if the applicant cannot read or write or does not understand the contents of this form.)

**1. Name and surname of interpreter**

The name and surname of the person who interprets the contents of the application form for the applicant must be recorded in paragraph G 1.

**2. Identity/Passport number of interpreter**

The identity/passport number of the interpreter must be recorded in paragraph G 2.

**3. Residential address**

The physical address of the interpreter must be recorded in paragraph G 3.

**4. Code**

The postal code of the interpreter's residential address must be recorded in paragraph G 4.

**5. Postal address**

The postal address of the interpreter must be recorded in paragraph G 5.

**6. Code**

The postal code of the interpreter's postal address must be recorded in paragraph G 6.

**7. Telephone number**

**7.1 Home:** The interpreter's home telephone number, including the dialling code, (for example, (012) 667 1923) must be recorded in paragraph G 7.1.

**7.2 Work:** The interpreter's work telephone number, including the dialling code, (for example, (011) 577 5913) must be recorded in paragraph G 7.2.

**8. Cellphone number**

The cellphone number (if applicable) of the interpreter must be recorded in paragraph G 8.

**9. Fax**

The fax number, including the area dialling code, of the interpreter must be recorded in paragraph G 9.

**10. E-mail address**

The e-mail address (if applicable) of the interpreter must be recorded in paragraph G 10.

**11. Interpreted from (language)**

The language from which the application form was interpreted and the language to which it was interpreted and which is understandable to the applicant (for example, English to Zulu) must be recorded in paragraph G 11.

**12. Date**

The date on which the interpreter assists the applicant must be recorded in paragraph G 12.

**13. Signature of interpreter**

The signature of the interpreter who assists the applicant who cannot read or write or does not understand the document must be recorded in paragraph G 13.

**14. Place**

The place where the interpreter assists the applicant must be recorded in paragraph G 14.

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

If the interpreter is a police official, his/her rank (in block letters) must be recorded in paragraph G 15.

**16. Persal number of police official (if applicable)**

If the interpreter is a police official, his/her SAPS Persal number must be recorded in paragraph G 16.

**SECTION H: FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER****1. RECOMMENDATION REGARDING THE APPLICATION**

The applicable answer must be indicated with an X in paragraph H 1, for example:

Recommended	X	Not recommended	
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**2. Motivation**

A motivation regarding the recommendation must be recorded in paragraph H 2. The motivation must be based on actual facts.

**3. Name of Designated Firearms Officer in block letters**

The initials and surname (in block letters) of the Designated Firearms Officer who made the recommendation must be recorded in paragraph H 3.

**4. Date**

The date on which the Designated Firearms Officer made the recommendation must be recorded in paragraph H 4.

**5. Rank of Designated Firearms Officer in block letters**

The rank (in block letters) of the Designated Firearms Officer who made the recommendation must be recorded in paragraph H 5.

**6. Place**

The city/town where the Designated Firearms Officer made the recommendation must be recorded in paragraph H 6.

**7. Signature of Designated Firearms Officer**

The signature of the Designated Firearms Officer who made the recommendation must be recorded in paragraph H 7.

**8. Persal number of the Designated Firearms Officer**

The SAPS Persal number of the Designated Firearms Officer who made the recommendation must be recorded in paragraph H 8.