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 who approved the application 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 branch 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 representative’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 the 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:
   
<table>
<thead>
<tr>
<th>Recommended</th>
<th>X</th>
<th>Not recommended</th>
</tr>
</thead>
</table>

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.