



NSW POLICE FORCE - FIREARMS REGISTRY

Notification of Move Interstate and Request to Cancel NSW Firearms Licence

ABN 43 408 613 180

Please complete the form below, use 'File / Save As' to save a PDF copy to your system and email a copy to firearmstransferenquiry@police.nsw.gov.au

This form is used for NSW licence holders who have moved to another State or Territory on a permanent basis and wish to request cancellation of their NSW firearms licence.

NOTE: You must obtain a firearms licence in the State or Territory where you currently reside AND all your firearms must be registered to that interstate firearms licence. If you now reside permanently interstate, but you wish to continue to store your firearms in NSW, you will need to obtain a Firearms Permit authorising you to possess firearms in NSW for the purpose of storage. However, **your firearms MUST still be registered to the licence issued in the jurisdiction in which you now reside** in order to obtain this permit.

THIS FORM DOES NOT APPLY TO ADF, POLICE AND PUBLIC SERVANTS POSTED OUTSIDE NSW.

A. PERSONAL AND CONTACT DETAILS

NSW FIREARMS LICENCE NO	<input type="text"/>	NEW INTERSTATE FIREARMS LICENCE NUMBER	<input type="text"/>
LAST NAME	<input type="text"/>	FIRST NAMES	<input type="text"/>
DATE OF BIRTH	<input type="text"/> <input type="text"/> <input type="text"/>	MALE	<input type="checkbox"/> FEMALE <input type="checkbox"/> EMAIL <input type="text"/>
MOBILE PHONE	<input type="text"/>	BUSINESS PHONE	<input type="text"/> HOME PHONE <input type="text"/>

B. OLD RESIDENTIAL ADDRESS IN NSW

UNIT NUMBER	<input type="text"/>	STREET NUMBER	<input type="text"/>	PROPERTY NAME	<input type="text"/>
STREET NAME	<input type="text"/>	SUBURB	<input type="text"/>	STATE	<input type="text"/> POSTCODE <input type="text"/>

C. INTERSTATE RESIDENTIAL ADDRESS

UNIT NUMBER	<input type="text"/>	STREET NUMBER	<input type="text"/>	PROPERTY NAME	<input type="text"/>
STREET NAME	<input type="text"/>	SUBURB	<input type="text"/>	STATE	<input type="text"/> POSTCODE <input type="text"/>

E. LOCATION OF FIREARMS - if same as INTERSTATE Residential Address mark this box with an X

UNIT NUMBER	<input type="text"/>	STREET NUMBER	<input type="text"/>	PROPERTY NAME	<input type="text"/>
STREET NAME	<input type="text"/>	SUBURB	<input type="text"/>	STATE	<input type="text"/> POSTCODE <input type="text"/>

Are all your firearms now stored at this new address interstate?

If 'NO', please provide information below on the current location of the firearms.

YES NO

INFORMATION CONTAINED IN THIS FORM WILL BE RETAINED AS PROOF OF NOTIFICATION OF A CHANGE OF ADDRESS FROM NSW TO AN INTERSTATE JURISDICTION. BY SELECTING THE 'SUBMIT BY EMAIL' BUTTON BELOW, YOU ARE CONFIRMING THE INFORMATION SUPPLIED HEREIN IS CORRECT AND REQUESTING CANCELLATION OF YOUR NSW FIREARMS LICENCE.

I confirm all the details above as correct and submit a request for cancellation of my NSW firearms licence.

