



NSW Police Force
www.police.nsw.gov.au

NSW POLICE FORCE - FIREARMS REGISTRY

Prohibited Weapons Dealer Genuine Reason Form

PLEASE READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

This is an **interactive** form and applies to a person making application to possess, buy, sell, manufacture, test and/or repair prohibited weapons in the course of carrying on a business as a prohibited weapons dealer.

Please complete all sections, print this form and submit with the P638 'Application for a Prohibited Weapons Permit' form and any supporting documentation to the **Firearms Registry, Locked Bag 5102, Parramatta NSW 2124.**

BUSINESS APPLICANTS ONLY

Business or Organisation Name

Name of Nominated Person
for Business or Organisation

OR

INDIVIDUAL APPLICANTS ONLY

Permit Holder Name

Do not staple or pin

Individual applicants only.
Attach passport style photo



Individual Applicants ONLY- Passport sized colour photograph of yourself endorsed and signed on the back by a JP or police officer 'This is a true photo of NAME' attached.

Nominated person for Business AND individual applicants - Documentation of Proof of Identity attached (*if no other NSW firearms licence or permit is held or has been held*). See FACT Sheet 'Proof of Identity' for acceptable 100 point ID documents.

1. TYPES OF PROHIBITED WEAPONS

Provide information below on the types of prohibited weapons or other articles that are required.

- | | | | | | | |
|------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Item 1(1) | <input type="checkbox"/> Item 1(8) | <input type="checkbox"/> Item 2(7) | <input type="checkbox"/> Item 2(14) | <input type="checkbox"/> Item 2(18B) | <input type="checkbox"/> Item 3(1) | <input type="checkbox"/> Item 4(3) |
| <input type="checkbox"/> Item 1(2) | <input type="checkbox"/> Item 1A(1) | <input type="checkbox"/> Item 2(8) | <input type="checkbox"/> Item 2(15) | <input type="checkbox"/> Item 2(19) | <input type="checkbox"/> Item 3(3) | <input type="checkbox"/> Item 4(4) |
| <input type="checkbox"/> Item 1(3) | <input type="checkbox"/> Item 1A(2) | <input type="checkbox"/> Item 2(9) | <input type="checkbox"/> Item 2(16) | <input type="checkbox"/> Item 2(20) | <input type="checkbox"/> Item 3(4) | <input type="checkbox"/> Item 4(5) |
| <input type="checkbox"/> Item 1(4) | <input type="checkbox"/> Item 1A(3) | <input type="checkbox"/> Item 2(10) | <input type="checkbox"/> Item 2(17) | <input type="checkbox"/> Item 2(21) | <input type="checkbox"/> Item 3(5) | <input type="checkbox"/> Item 4(6) |
| <input type="checkbox"/> Item 1(5) | <input type="checkbox"/> Item 2(4) | <input type="checkbox"/> Item 2(11) | <input type="checkbox"/> Item 2(17A) | <input type="checkbox"/> Item 2(22) | <input type="checkbox"/> Item 3(6) | <input type="checkbox"/> Item 4(7) |
| <input type="checkbox"/> Item 1(6) | <input type="checkbox"/> Item 2(5) | <input type="checkbox"/> Item 2(12) | <input type="checkbox"/> Item 2(18) | <input type="checkbox"/> Item 2(23) | <input type="checkbox"/> Item 4(1) | <input type="checkbox"/> Item 4(8) |
| <input type="checkbox"/> Item 1(7) | <input type="checkbox"/> Item 2(6) | <input type="checkbox"/> Item 2(13) | <input type="checkbox"/> Item 2(18A) | <input type="checkbox"/> Item 2(24) | <input type="checkbox"/> Item 4(2) | <input type="checkbox"/> Item 4(9) |

If you have selected item 1A(1), you must complete the certification below.

- I hereby certify that any prohibited weapon referred to in clause 1A(1) of Schedule 1 of the Weapons Prohibition Act 1998 to which this permit relates will be deactivated and certified by the holder of a theatrical weapons armourer as having been deactivated.*

Nominated Permit Holder Name:

Signature:

Date:

2. EVIDENCE OF GENUINE REASON FOR OBTAINING THIS PERMIT

Provide evidence of your genuine reason to be issued a Prohibited Weapons Dealer Permit and complete the 'Business Declaration' supplied with your application.

AND
 Evidence of the business requirement for each type of prohibited weapon attached (eg. contracts, letters from clients, existing or potential customer base etc).





3. WEAPON SAFE KEEPING FACILITIES AND INSPECTION EVENT NUMBER

The safe storage facilities must be inspected by a police officer - provide the inspection event number below.

Inspection Event Number:

Do you require the Prohibited Weapons Dealer Permit to authorise the testing of prohibited weapons? **YES/NO** If 'YES' police must inspect the testing facilities to ensure the safe conduct of such testing.

Provide information below on the safe storage facilities specific to the types of prohibited weapons to be kept:

Consent or approval must be granted by the local consent authority for use of the premises as a weapons dealer business - attach copy of local consent authority to this application.

Copy of Local Consent Authority attached **YES/NO**

FOR WEAPONS DEALER BUSINESS CONDUCTED AT RETAIL PREMISES OPEN TO THE PUBLIC ONLY - applicant must obtain and maintain a public liability insurance policy that provides cover of not less than \$10,000,000.

Copy of Public Liability Insurance Policy attached **YES/NO**

FURTHER INFORMATION

It is a serious offence under the *Weapons Prohibition Act 1998* to make a statement or provide information in relation to an application that is false or misleading. By signing the Declaration on your weapons permit application form, you are certifying that ALL the information supplied in relation to this application is true and correct.

CHECKLIST

Make sure you have supplied ALL of the following required information:

All applicants are required to provide:

- A completed P638** 'Application for a Prohibited Weapon Permit' form.
- Proof of Identity** (if no other NSW firearms licence or firearms or weapons permit is held or has been held).
- Individual applicants** - A passport sized colour photo of yourself endorsed and signed on the back by a JP or serving police officer 'This is a true photo of NAME'.
- Business Applicants** - Business Declaration completed
- A Genuine Reason** form with the relevant sections completed:
 - Types of Prohibited Weapons required & certification section (if you have selected item 1A(1)).
 - Evidence of genuine reason & evidence of the business requirement for each type of prohibited weapon required.
 - Complete the 'Business Declaration'.
 - Details of weapon safe keeping facilities & police safe storage inspection event number.
 - Details of any consent or approval from the local consent authority for use of premises as a weapons dealer business
 - Details of public liability insurance policy for weapons dealer business conducted at retail premises (if applicable)
- Payment of \$127 MUST accompany this application.**

Employees - A completed P639 for each person to be authorised by this permit AND proof of identity for each person (if no other NSW firearms licence or permit is held or has been held) AND payment of \$25 per person.

