



**G. FIREARMS TYPES** - Mark the relevant boxes with an 'X' to indicate the type of firearms in which you wish to trade.

A     B     C     D     H

**Imitation Firearms**    If you wish to be authorised for imitation firearms, please enter the reason below.

**PROHIBITED FIREARMS**

If you wish to be authorised for prohibited firearms, you must complete the relevant section on the 'Firearms Dealer Licence Application Checklist' included with this application and substantiate your need to trade in these types of firearms.

**H. PERSONAL HISTORY - You MUST complete this section - Mark an 'X' in one box for each question**

Have you, in NSW or elsewhere:

- a) Been refused or prohibited from holding a firearms licence or permit or had a firearms licence or permit suspended, cancelled or revoked?    YES     NO
- b) Been recorded as a registrable person or corresponding registrable person under the *Child Protection (Offenders Registration) Act 2000*?    YES     NO
- c) Been subject to a firearms/weapons prohibition order?    YES     NO
- d) Ever attempted suicide or self harm, or in the past 12 months been referred or treated for alcoholism, drug dependence, or a mental or nervous disorder or illness?    YES     NO
- e) Within the last 10 years, been convicted of an offence involving firearms or weapons, prohibited drugs/plants/prescribed restricted substances, fraud/dishonesty/stealing, terrorism, violence, assaults against law enforcement officers, robbery, organised criminal groups and recruitment, riot, affray or an offence of a sexual nature or are you presently subject to a good behaviour bond in relation to one of those offences?    YES     NO
- f) Within the last 10 years, been the subject of a Apprehended Violence Order (other than an order which was revoked) or an injunction ordered by the Family Court or presently subject to an Interim Apprehended Violence Order?    YES     NO

**IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE PROVIDE DETAILS AS AN ATTACHMENT**

**I. DECLARATION**

- I fully understand and can comply with the firearms safekeeping requirements of the Firearms Act 1996 and associated Regulation.
- I understand that it is a serious offence under the Firearms Act 1996 to make a statement or provide information that I know is false or misleading & I certify that all the information contained in this application is true and correct in every detail.
- I authorise the release of my personal information to any third party the Commissioner deems appropriate and for the purposes of the relevant Authority verifying the details of this application.
- I agree to the NSW Police Force undertaking such enquiries as are necessary to establish that the information I have provided in relation to this application is true and correct.

Applicants Signature     Date

**CREDIT CARD PAYMENT** - Please debit my Credit Card for the amount of **\$500**    MasterCard     Visa Card

Card Number        Expiry Date Month     Year

Cardholder Name

Cardholder Signature     Date

**OFFICE USE ONLY**

Receipt No.     Amount **\$500.00**    Date