

# NSW POLICE FORCE - FIREARMS REGISTRY

## Deceased Estate - Permit to Acquire Longarms for Firearm Ownership Transfers

ABN 43 408 613 180

This form is to be completed by the Executor/s or Administrator/s AND the beneficiary of the firearms from the Deceased Estate. This form is for longarms only (e.g. Category A, B, C and/or D). Please complete the separate Handgun form for Category H firearms. Incomplete forms will not be processed.

Please download/save this form to your computer/device, complete the form electronically, save and send via email.

Alternatively, complete the form electronically, then print, scan and email. Email: [firearms@police.nsw.gov.au](mailto:firearms@police.nsw.gov.au)

### Details of the deceased Firearms Licence holder

Name  Date of Birth  DD/MM/YYYY Firearms Licence No.

### Details of the beneficiary - A separate form needs to be completed for each beneficiary.

Note: A Permit to Acquire (PTA) must not be issued to a person who is not the holder of a licence or permit which authorises the person to use or possess the firearm concerned - Section 31(3) of the *Firearms Act 1996*.

Name  Date of Birth  DD/MM/YYYY

NSW Firearms Licence No.  Contact Number  Email Address

**Safe Storage Address Details** - Enter the safe storage address details below. If any of the firearms listed are currently stored at an alternative address, please note the address in the space provided for each firearm.

Current safe storage address

If this application is approved, the firearms will be stored at: ☐ The above address **OR** ☐ The address noted below

Future safe storage address

### Firearm Details - Please list the details below for each firearm you are applying to acquire

**1** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

**2** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

**3** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

**4** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

**5** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

**6** Is this firearm for a Firearms Collection licence? **NO** ☐ **YES** ☐ Firearm Category  Registration Number

Frame Serial No  Safe storage address (if different to above)

Please select a good reason

Good reason (if 'Other' option is selected above)

### Executors / Administrators Signature and Declaration

- \* I certify that the information contained in this application is true and correct in every detail.
- \* I agree to the NSW Police Force undertaking such enquiries as is necessary to establish the veracity of any information I have provided in this application.
- \* I authorise the release of my personal information to any third party the Commissioner deems appropriate.

Name Executor 1	<input type="text"/>	Contact details (phone/email)	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>
Name Executor 2	<input type="text"/>	Contact details (phone/email)	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

### Beneficiary Signature and 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 and I certify that all the information contained in this application is true and correct in every detail.
- \* I certify that I can satisfy the legislative requirements and produce evidence of my genuine reasons as specified within this application (for example, club membership to support Sport/Target shooting).
- \* I certify that the good reason as stated in this application is true and correct.
- \* I authorise the release of my personal information to any third party the Commissioner deems appropriate and for the purposes of any 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.

Signature	<input type="text"/>	Date	<input type="text"/>
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**Note: Ownership of the firearm/s noted within this application will only be transferred once a Permit to Acquire/s has been granted by the Firearms Registry, in accordance with section 31 of the *Firearms Act 1996*.**

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Alternatively, complete the form electronically, then print, scan and send via email.

Email: [firearms@police.nsw.gov.au](mailto:firearms@police.nsw.gov.au)