NSW Police Force

Firearms Registry
Firearms Permit Application

Failure to complete all sections of this form and provide all the required supporting documentation may result in delay or refusal of your application.

This application is for a *(Please select appropriate box)*

☐ New Application ☐ Renewal

Previous or current NSW Licence or Permit Number

A. Permit Type

Please choose the permit you wish to apply for below. Should you wish to apply for more than one permit, you must complete a separate 'Application for a Firearms Permit' P634 form for each permit application.

This application is for a *(please select)*

- ☐ Ammunition Collection Permit
- ☐ Ammunition Permit
- ☐ Ammunition Acquire & Supply Permit
- ☐ Arms Fair Permit
- ☐ Film/Television/Theatrical Production Permit
- ☐ Firearms Instructor Permit
- ☐ Firearms Museum Permit
- ☐ General Permit - complete the box below with permit type
- ☐ Heirloom Permit
- ☐ Historical Cannon Permit
- ☐ Historical Re-enactment Organisers Permit
- ☐ Imitation Firearms Permit
- ☐ Imitation Firearms Permit - Collector
- ☐ International Visitors Competition Permit
- ☐ Large Calibre Pistol Permit
- ☐ Laser Game Permit - Imitation Firearms
- ☐ Laser Game Permit - Modified Firearms
- ☐ Minors Permit
- ☐ Off Duty Possession of Longarm Permit
- ☐ Off Duty Possession of Pistol Permit
- ☐ Permit to Acquire Non-Prohibited Firearm on Leaving Australia
- ☐ Pistol Permit
- ☐ Retriever Trial Permit
- ☐ RSL Display Permit
- ☐ Safari/Hunting Participation Permit - Overseas Participants
- ☐ Scientific Purposes Permit
- ☐ Security Firm Employee Permit
- ☐ Starting Pistol Permit
- ☐ Storage of Firearms in NSW Permit

If you selected 'General Permit' or if the permit is not in the list above, please specify the type of permit you wish to apply for:

B. Nominated Person *(Business or nominated permit holder - individual)*

Last Name

Given Names

Date of Birth *(dd/mm/yyyy)*

Gender

NSW Drivers Licence Number

If you have been known by another name, please provide details below *(Last Name, Given Names)*

C. Residential address

D. Postal address *(If the same as your residential address please mark this box)* ☐

E. Business, organisation, club or government agency applicants only

Complete the sections below **and attach evidence** to prove status as a business, club, agency or organisation.

Business/Club Name

Trading Name

Business/Club Address

ABN Number

OR ACN Number

OR Approval No. of Club/Range

F. Safekeeping address of firearms *(This section **MUST** be completed by all applicants even if you do not currently possess any firearms)*

If the safe storage address is the same as the residential address mark this box ☐ YES ☐ NO *If 'NO', complete details below.*

Overseas competitors please insert the details of the storage address for the firearms in NSW.

Storage Address

Name of NSW Club or Person Storing firearms (if applicable).

Provide additional details, as an attachment, if your firearms are stored at more than one location.

- The *Firearms Act 1996* prescribes strict requirements for the safekeeping of firearms. Failure to comply attracts severe penalties. See Safe Storage FACT Sheets available on the Firearms Registry website.

G. Personal History *(You **MUST** complete this section - select one box for each question)*

Reminder: Please be advised that it is an offence under the Firearms Act 1996 for a person to make a statement or to provide information in connection with a licence application which the person knows to be false or misleading. The provision of false or misleading information may result in your application being refused.

Criminal History

The following questions relate to your criminal history:

1)	Are you currently subject to an injunction, apprehended violence order, interim or provisional apprehended violence order, restraining order or any other prescribed order or decision in NSW or elsewhere?	☐ YES	☐ NO
2)	At any time within the past 10 years, have you been subject to an injunction, apprehended violence order interim or provisional apprehended violence order, restraining order or any other prescribed order or decision in NSW or elsewhere?	☐ YES	☐ NO
3)	Are you, or have you ever been, a "registrable person• or a "corresponding registrable person" under the *Child Protection (Offenders Registration) Act 2000*?	☐ YES	☐ NO
4)	Are you, or have you ever been, subject to a firearms prohibition order?	☐ YES	☐ NO
5)	Are you, or have you ever been, subject to a weapons prohibition order?	☐ YES	☐ NO
6)	At any time within the past 10 years, have you been convicted of a criminal offence in New South Wales or elsewhere?	☐ YES	☐ NO
7)	Are you currently subject to a good behaviour bond in New South Wales or elsewhere?	☐ YES	☐ NO
8)	Are you currently subject to a community correction order or conditional release order imposed in New South Wales?	☐ YES	☐ NO

Medical History

The following questions relate to your medical history:

9)	Do you have any health conditions which may prevent you from exercising continuous and responsible control over firearms?	☐ YES	☐ NO
10)	Is your NSW driver licence currently suspended or cancelled on medical grounds?	☐ YES	☐ NO
11)	Have you ever attempted suicide or self-harm?	☐ YES	☐ NO
12)	Have you, in the past 12 months, been referred or treated for a mental or nervous disorder or illness?	☐ YES	☐ NO
13)	Have you, in the past 12 months, been referred or treated for alcoholism or drug dependence?	☐ YES	☐ NO
14)	Is there any reason why your way of living or domestic circumstances may prevent you from personally exercising continuous and responsible control over firearms?	☐ YES	☐ NO
15)	Is there anything else you wish to disclose which might affect the Firearm Registry's assessment of whether you are a fit and proper person and whether you can be trusted to have possession of firearms without danger to public safety or to the peace?	☐ YES	☐ NO
16)	Is there any other reason why it would be contrary to the public interest for you to be issued with a firearms licence?	☐ YES	☐ NO
17)	Is there any other reason why you can't be trusted to have possession of firearms without danger to public safety or to the peace?	☐ YES	☐ NO

Licencing History

The following questions relate to your licencing history:

18)	Have you ever had an application for a licence or permit refused in New South Wales or elsewhere?	☐ YES	☐ NO
19)	Have you ever had a firearms licence or permit suspended or revoked, whether in New South Wales or elsewhere?	☐ YES	☐ NO
20)	Have you been subject to an order or injunction in family law proceedings in the last 10 years?	☐ YES	☐ NO

IF YOU ANSWERED YES TO ANY OF THE PREVIOUS QUESTIONS, PLEASE PROVIDE FURTHER DETAILS BELOW AND/OR PROVIDE DETAILS AS AN ATTACHMENT

H. Payment Details

You must pay the application fee online via the Community Portal on the NSW Police Force website: www.police.nsw.gov.au. Payment may only be made by VISA or MasterCard. You must enter your receipt number in the box below before lodging your application.

Contact the Firearms Registry on 1300 362 562 if you have any questions regarding online payments.

Amount $

Payment Receipt Number

Receipt Date

Cardholder's Name (BLOCK LETTERS)

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 and 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 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.

Applicants signature

Date