



**SOUTH AFRICAN POLICE SERVICE
EXPIRED FIREARM LICENCE, COMPETENCY CERTIFICATE, TEMPORARY AUTHORIZATION
AND PERMITS VERIFICATION CERTIFICATE**

INSTRUCTIONS FOR COMPLETION OF FORM

This form must be completed in black ink / A separate form must be completed for each firearm handed in / All the information must be provided / The form must be completed IN DUPLICATE, Attached copy to SAPS 271, Original must be handed to the owner.

PARTICULARS OF OWNER OR RESPONSIBLE PERSON OF FIREARM

SURNAME		INITIALS	
FULL NAMES			
ADDRESS			
TEL CODE	TEL NO (H)	CELL NO	
ID NUMBER	PASSPORT NO		
NATIONALITY			

PARTICULARS OF FIREARM

TYPE	Pistol	Rifle	Revolver	Shotgun	Carbine	Rifle / Shotgun Combination
ACTION	Semi-Automatic (if applicable)		Automatic (if applicable)			

Calibre: Make:

Manufacturer's serial no:

DECLARATION

I, the above mentioned and undersigned, declare that –
 I confirm that I lodge the firearm application before a physical safe inspection is done by the Designated Firearm Officer. The firearm will be stored in accordance with regulation 86 of the Act until valid license is issued.
 Should the license applied for be refused, I undertake to dispose the firearm in question by selling, donation, deactivation, surrendering or any such manner as the Registrar may determine. The disposal must take place within 60 days after receipt of the refusal letter. If the firearm is not disposed of within 60 days, it should be forfeited to the State and the former holder of the license must surrender it immediately to the police station and in manner as the Registrar may determine.

I accept this form as being an official acknowledgement of receipt for the application for the above firearm.

SIGNED AT.....ON THE.....DAY.....20.....

SIGNATURE OF FIREARM OWNER

DESIGNATED FIREARM OFFICIAL INSPECTED FIREARM