

## ANNEXURE TO RENEWAL OF FIREARM LICENCE IN TERMS OF SECTION 24 OF THE FIREARMS CONTROL ACT, 2000 (ACT NO. 60 OF 2000)

Section 24 (3) of the Firearms Control Act, 2000 (Act No. 60 of 2000)

|    | OFFICIAL DATE STAMP                                   | ,         | A. FOR OFFICIAL USE BY POLICE STATION WHERE THE APPLICATION IS RECEIVED |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|----|---|-----------|---|-------|---------|---------|--------|-------|--------|-------|-------|-------------|----------|------|------|----------|----------|--|---|--|--|
|    |   |           |   | 1. I  | Provinc | ce      |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           |   | 2. I  | Police  | station |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           |   | 3. (  | Compo   | onent c | ode    |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           |   | 4. 5  | SAPS    | 86 refe | erence | numbe | r      |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           | -   |       |         |         |        |       |        |       |       |             | •        |      |      |          |          |  |   |  |  |
|    | DATE RECEIVED   |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    | A.  | I         | PARTICU   | JLAR  | S OF    | THE I   | HOLDI  | ER OF | THE    | FIREA | ARM I | LICEN       | ICE      |      |      |          |          |  |   |  |  |
|    | NATURAL PERSON'S DET                                  | AILS      |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           | _   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
| 1. | SA ID Pass  | sport     |   |       |         |         |        |       |        |       |       | l           |          | ı    | ı    | ı        | <b>-</b> |  | ı |  |  |
| 2. | Identity number of natural person                     |           |   |       |         |         |        |       | -      |       |       |             |          | -    |      |          | -        |  |   |  |  |
| 3. | Passport number of natural person                     | Π         |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
| 4. | Surname   |           |   |       |         |         |        |       |        |       |       | 5. Initials |          |      |      |          |          |  |   |  |  |
|    | 0   |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
| 6. | Current residential address                           |           |   |       |         |         |        |       |        |       |       | <i>a</i> T  | Postal o |      |      |          |          |  |   |  |  |
| 0  | Doctal address  | <u> </u>  |   |       |         |         |        |       |        |       |       | /. F        | ostai c  | code |      |          | <u> </u> |  |   |  |  |
| 8. | Postal address  9. Postal code                        |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
| 10 | Telephone number                                      | 10.1 Home | (   | )     |         |         |        |       | 10.2   | Work  |       | ( )         |          |      |      |          |          |  |   |  |  |
|    | Cellphone number                                      |           | `   |       |         |         |        |       | 10.4   | Fax   |       | ( )         |          |      |      |          |          |  |   |  |  |
|    | E-mail address  |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    |   |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    | В.  | Ι         | DESCRIP   | TIOIT | N OF    | FIREA   | RM     |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
|    | TYPE OF FIREARM                                       |           |   |       |         |         |        |       |        |       |       |             |          |      |      |          |          |  |   |  |  |
| 1. | Rifle   |           | Shotgun   |       |         |         |        | F     | Iandgu | ın    |       |             |          |      | Comb | oination |          |  |   |  |  |
|    | Other; specify (armament, indeterminable design type) |           |   |       |         | •       |        |       |        |       |       |             |          |      |      |          |          |  | • |  |  |

DETAILS OF FIREARM (Indicate with an x)

| 1.1  | Action  | Semi-automatic            |        |               | Automatic  | Manual                               | ınual                   |     |  |  |  |  |  |  |  |  |  |
|------|---|---------------------------|--------|---------------|--|--------------------------------------|-------------------------|-----|--|--|--|--|--|--|--|--|--|
|      |   | Other action (specif      | fy)    |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      |   |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.2  | Name and addresses engraved in the metal:                                       |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      |   |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.3  | Calibre   |                           |        |               |  | 1.4                                  | Calibre code            |     |  |  |  |  |  |  |  |  |  |
| 1.5  | Make  |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.6  | Model   |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      | Firearm component type  |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.7  | Barrel serial number  |                           |        |               |  |                                      | 1.8 Make                |     |  |  |  |  |  |  |  |  |  |
| 1.9  | Frame serial number   |                           |        |               |  |                                      | 1.10 Make               |     |  |  |  |  |  |  |  |  |  |
| 1.11 | Receiver serial number  |                           |        |               |  |                                      | 1.12 Make               |     |  |  |  |  |  |  |  |  |  |
|      | C. TYPE OF APPLICATTION FO  | OR THE RENEWAL OF         | A LI   | CENC          | CE, PERMIT, OR AUTHORIS.                             | ATION                                | I (indicate with an x)  |     |  |  |  |  |  |  |  |  |  |
| 1.   | Licences  |                           |        | 3.            | Permits  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.1  | Licence to possess a firearm for self-defence                                   |                           |        | 3.1           | Permit to possess ammunution in a private collection |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.2  | Licence to possess a restricted firearm for self                                | f-defence                 |        | 3.2           | Permit to possess ammunution                         | in a pu                              | blic collection         |     |  |  |  |  |  |  |  |  |  |
| 1.3  | Licence to possess a firearm for occasional hu                                  | unting and sport-shooting |        | 3.3           | Import permit  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.4  | Licence to possess a firearm for dedicated hur sport-shooting                   |                           | 3.4    | Export permit |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.5  | Licence to possess a firearm in a private collect                               | ction                     |        | 3.5           | Transporters permit                                  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.6  | Licence to possess a firearm in a public collect                                | tion                      |        | 3.6           | In-transit permit                                    |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 1.7  | Licence to possess a firearm for business purp hunting                          | ooses / Business in       |        | 3.7           | Multiple import and or export p                      | Multiple import and or export permit |                         |     |  |  |  |  |  |  |  |  |  |
| 1.8  | Licence to possess a firearm for business purp<br>purposes                      | ooses / other business    |        | 3.8           | Temporary import or export pe                        | ermit                                |                         |     |  |  |  |  |  |  |  |  |  |
| 2.   | Licence issued to particular categories of                                      | persons                   |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 2.1  | Licence to deal in firearms and ammunution                                      |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 2.2  | Licence to manufacture firearms and ammunut                                     | tion                      |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
| 2.3  | Licence to conduct business as a gunsmith                                       |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      |   |                           |        |               |  |                                      |                         | Yes | No   |  |  |  |  |  |  |  |  |
|      | D. I HEREBY CERTIFY THAT THE FOLI<br>BELIEF (INDICATE YES OR NO)                | LOWING INFORMATION        | ON IS  | TRU           | E AND CORRECT TO THE E                               | BEST C                               | OF MY ABILITY AND       | 105 | 110  |  |  |  |  |  |  |  |  |
| 1.   | I am in possession of a legal and valid   | competency certifica      | te to  | posse         | ess a firearm.                                       |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      | If yes, state type of competency certification                                  |                           |        |               | Shotgun Rifle  |                                      | Hand Machine Carbine    |     |  |  |  |  |  |  |  |  |  |
|      | If no, state reasons:   |                           |        |               |  |                                      |                         |     |  |  |  |  |  |  |  |  |  |
|      |   |                           |        |               |  |                                      |                         | Yes | No   |  |  |  |  |  |  |  |  |
| 2.   | I have not been convicted of any offer<br>period of imprisonment without the op |                           | rearm  | ns Co         | ntrol Act, 2000 (Act No. 6                           | 0 of 2                               | 000) and sentenced to a |     |  |  |  |  |  |  |  |  |  |
| 3.   | I have not been declared unfit to posse   |                           | of th  | e Fire        | earms Control Act 2000 (                             | Act No                               | o 60 of 2000)           | +-  | <del>                                     </del> |  |  |  |  |  |  |  |  |
| ٥.   | I have a safe that is properly mounted  |                           |        |               |  |                                      |                         | +   |  |  |  |  |  |  |  |  |  |
| 4.   | and / or 953-2  | to a fixed structure a    | iiu W. |               | complies with the requirem                           | ciito U                              | 1 Dr IDO Standard 755-1 |     |  |  |  |  |  |  |  |  |  |

| 4.1 | Provide detailed description of safe storage facility  |        |        |
|-----|--|--------|--------|
|     |  |        |        |
|     |  |        |        |
|     |  |        |        |
|     |  | V      | NI-    |
|     | I will carry the firearm as prescribed in Section 98(5)(a) of the Firearms Control Act, 2000 (Act No. 60 of 2000)  | Yes    | No     |
| 5   | and regulation 78 of the Firearms Control Regulations 2004.  |        |        |
|     |  |        | -      |
| 6   | MOTIVATION THAT I DID CONTINUE TO COMPLY WITH THE PURPOSE FOR WHICH THE FIREARM HAS BEEN ORIGIBNALLY LICE  | ENCE   | D      |
|     | (Applicant to provide supporting documents to substantiate his/her motivation)   |        |        |
|     |  |        |        |
|     |  |        |        |
|     |  |        |        |
|     |  |        |        |
|     |  | •••••• | •••••• |
|     | (attach additional motivation if space is n  | ot ade | quate) |
|     |  |        |        |
| 7   | DECLARATION BY APPLICANT   |        |        |
|     | I know and understand the contents of this sworn declaration / solmn statement   |        |        |
|     | I have no objection to taking the prescribed oath / solmn affirmation.   |        |        |
|     | I consider the prescribed oath/ affirmation to be binding on my conscience   |        |        |
| 7.1 | 7.2 Date   |        |        |
|     | Name of applicant in block letters   |        |        |
| 7.3 | 7.4 Place  |        |        |
|     | Signature of applicant   |        |        |
|     | E. (This section must be completed only if the applicant cannot read or write)   |        |        |
|     |  |        |        |
| 1.  | 2. Fingerprint 3. Date designator  |        |        |
|     | 4.   |        |        |
|     | Name of applicant in block letters   |        |        |
|     |  |        |        |
|     | 5. Place   |        |        |
| ,   | CERTIFICATE OF POLICE OFFICIAL DEALING WITH DECLARATION  |        |        |
| 6.  |  | Æ.     |        |
|     | I CERTIFY THAT THE APPLICANT HAS ACKNOWLEDGED THE CONTENTS OF THIS DECLARATION WHICH WAS SWORN / AFFIRMED TO BEFORE N<br>THE APPLICANT HAS PLACED HIS SIGNATURE / THUMBPRINT ON THIS DECLARATION IN MY PRESENCE. | TE.    |        |
| 7.  | Date 8. Time   |        |        |
| 9.  | Place 10.  |        |        |
| ٠.  | Name of Designated Firearms Officer / Station Commander  |        |        |
| 11. | 12.  |        |        |
|     | Rank of Designated Firearms Officer / Station Commander Persal number of Designated Firearms Officer / Station Comm  | nander | :      |
|     |  |        |        |
|     | 13.  |        |        |
|     | Rank of Designated Firearms Officer / Station Commander  |        |        |

| F.  | F. FOR OFFICIAL USE BY THE DECIDING OFFICER              |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|---|--|----------|--|----------|--------|--|--------|--------------|-----------------------------|------------|--------|---|--------------|---|--------|-------|--------|--------|--------|---|-------|------|---|--|
| 1.  | Outstai  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  | •••••• |              |                             |            |        |   |              | • |        |       |        |        |        |   |       |      |   |  |
|   |  | •••••    |  | •••••    |        |  | •••••  | •••••        | •••••••                     |            | •••••• | ••••••                                  | •••••        | ••••••                                  |        | ••••• | •••••• | •••••  | •••••  |   | ••••• |      | • |  |
|   |  |          |  | ••••••   |        |  | •••••• | •••••        |                             |            |        | • |              | ••••••                                  |        | ••••• | •••••• | •••••• | •••••• |   |       |      |   |  |
|   |  | •••••    |  | •••••    | •••••  |  | •••••  | •••••        |                             |            |        | •••••                                   |              | ••••••                                  |        | ••••• | •••••  | •••••  | •••••• |   | ••••• |      |   |  |
|   |  |          |  |          |        |  | _      |              | <ol><li>Persal nu</li></ol> | mber       | С      | С                                       | Y            | Y                                       | -      | M     | M      | -      | D      | D | 3.    | Date |   |  |
|   |  | <u> </u> |  | <u> </u> |        |  |        | <u> </u>     |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
| 4. Signature of deciding officer                            |  |          |  |          |        |  |        |              |                             |            |        | 5. Name in block letters                |              |   |        |       |        |        |        |   |       |      |   |  |
| 4. Signature of deciding officer 5. Ivalue in block letters |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
| 6. A  | 6. Application for licence approved (indicate with an x) |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   | - 7. Persal nu   |          |  |          |        |  | number | С            | С                           | Y          | Y      | -                                       | M            | M                                       | -      | D     | D      | 8.     | Date   |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             | ī          |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          | of dec |  |        |              |                             | 10. Office | r code | ;                                       | 11. <b>N</b> | Vame                                    | in blo | ck le | tters  |        |        |   |       |      |   |  |
| 12. Application for licence refused (indicate with an X)    |  |          |  |          |        |  |        | 13. <b>F</b> | Reasor                      | n(s) f     | or ref | usal.                                   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  | •••••• |              | •••••••                     |            |        |   |              | • |        |       |        |        | •••••• |   |       |      |   |  |
|   |  |          |  | ••••••   |        |  | •••••• | •••••        |                             |            |        | • |              | ••••••                                  |        | ••••• | •••••• | •••••• | •••••• |   |       |      |   |  |
|   |  | •••••    |  | •••••    | •••••  |  | •••••  | •••••        |                             |            |        | ••••••                                  |              | ••••••                                  |        | ••••• | •••••  | •••••  | •••••  |   |       |      |   |  |
|   |  |          |  |          |        |  | _      |              | 14. Persal number           |            | С      | С                                       | Y            | Y                                       | -      | M     | M      | -      | D      | D | 15.   | Date |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             |            |        |   |              |   |        |       |        |        |        |   |       |      |   |  |
|   |  |          |  |          |        |  |        |              |                             | 1 1        |        |   | I            |   |        |       |        |        |        |   |       |      |   |  |