



SOUTH AFRICAN POLICE SERVICE

APPLICATION FOR A COMPETENCY CERTIFICATE

Section 9 of the Firearms Control Act, 2000 (Act No 60 of 2000)

<p style="text-align: center;">OFFICIAL DATE STAMP</p> <p style="text-align: center;">DATE RECEIVED</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="10" style="text-align: center; padding: 2px;">A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED</th> </tr> <tr> <td style="padding: 2px;">1 Application reference No</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>	A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED										1 Application reference No									
A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED																					
1 Application reference No																					

B. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS RECEIVED									
1	Province								
2	Area								
3	Police station								
4	Component code								
5	Firearm applications register reference No	SAPS 86	NO		YEAR				

C. FOR OFFICIAL USE BY THE CENTRAL FIREARMS REGISTER (CFR)									
1 Outstanding/Additional information required									
							-		2 Persal number
									3 Date
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="margin-top: 0;">.....</p> <p style="margin-top: 0;">4 Signature of police official</p> </div> <div style="width: 50%;"> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p style="margin-top: 0;">5 Name in block letters</p> </div> </div>									
6 Application for competency certificate approved (Indicate with an X)									
									8 Date
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="margin-top: 0;">.....</p> <p style="margin-top: 0;">9 Signature of CFR officer</p> </div> <div style="width: 10%;"> <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div> <p style="margin-top: 0;">10 Officer code</p> </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p style="margin-top: 0;">11 Name in block letters</p> </div> </div>									
12 Application for competency certificate refused (Indicate with an X)									
13 Reason(s) for refusal									
									15 Date
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="margin-top: 0;">.....</p> <p style="margin-top: 0;">16 Signature of CFR officer</p> </div> <div style="width: 10%;"> <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div> <p style="margin-top: 0;">17 Officer code</p> </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p style="margin-top: 0;">18 Name in block letters</p> </div> </div>									

D. TYPE OF COMPETENCY CERTIFICATE (Indicate with an X)	
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1	A	To trade in firearms						
2	B	To manufacture firearms						
3	C	To conduct business as a gunsmith						
4	D	To possess a firearm (Indicate with an X)						
	Handgun		Rifle		Shotgun		Self loading Rifle	

E.	PARTICULARS OF APPLICANT
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1 TYPE OF CITIZENSHIP (Indicate with an X)

1.1	SA citizen		Non-SA citizen with permanent residence*																											
2	Identity number of applicant																	-						-				-		
3	Surname																	4	Initials											
5	Full names																													
6	Age				7	Gender	Male		Female		(Indicate with an X)																			
8	Date of birth					-			-																					
9	Residential address																													
																			10	Postal Code										
11	Postal address																													
																			12	Postal Code										
13	Description of type of residence (eg shack, flat, caravan, cottage, house, hostel or homeless)																													
14	Trade or profession											15	If self-employed, specify																	
16	Name of employer/company																													
17	Business address																													
																			18	Postal Code										
19	Telephone number	19.1 Home		()						19.2 Work		()																		
19.3	Cellphone number											20 Fax		()																
21	E-mail address																													

22 **Marital status** (Indicate with an X)

22.1	Single		Married		Divorced		Widow		Widower	
	Other (specify)									

23 PARTICULARS OF SPOUSE/PARTNER (If applicable)

23.1 **Type of identification** (Indicate with an X)

[illegible]

* In case of a non-SA citizen proof of permanent residence must be submitted.

F. APPLICATION FOR A COMPETENCY CERTIFICATE TO TRADE IN FIREARMS AND/OR AMMUNITION, OR TO MANUFACTURE FIREARMS AND/OR AMMUNITION, OR TO CONDUCT BUSINESS AS A GUNSMITH
(THIS APPLIES TO FIREARM DEALERS, MANUFACTURERS AND GUNSMITHS ONLY.)

1 Have you successfully completed the prescribed test on the knowledge of this Act? (Indicate with an X)

YES

NO

2 Have you successfully completed the prescribed training and practical test for dealers, manufacturers or gunsmiths? (Indicate with an X)

YES

NO

3 In the case of dealers, manufacturers or gunsmiths, submit details of relevant qualifications/experience

G. APPLICATION FOR A COMPETENCY CERTIFICATE TO POSSESS A FIREARM
(THIS APPLIES TO PRIVATE PERSONS ONLY.)

1 Have you successfully completed the prescribed test on this Act? (Indicate with an X)

YES

NO

2 Have you successfully completed the prescribed training and practical tests on the safe and efficient handling of a firearm?
(Indicate with an X)

YES

NO

3 For which firearm(s) did you receive the prescribed training? (Indicate with an X)

Pistol

Revolver

Rifle

Shotgun

Other (specify)

H. OTHER INFORMATION

1 DO YOU HAVE A TRAINING CERTIFICATE ISSUED BY AN ACCREDITED TRAINING INSTITUTION? (Indicate with an X)

YES

NO

2 Name of accredited training institution

3 Serial number on training certificate issued

4 Date issued

5 HAVE YOU EVER BEEN CONVICTED OF AN OFFENCE COMMITTED INSIDE OR OUTSIDE THE BORDERS OF THE RSA?
(Indicate with an X)

YES

NO

If yes, submit the following details

5.1 Police station ⁽¹⁾

5.2 CAS/Case number

5.3 Charge

5.4 Outcome

5.5 Police station ⁽²⁾

5.6 CAS/Case number

5.7 Charge

5.8 Outcome

6

ARE THERE ANY CASES PENDING AGAINST YOU? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit the following details			
6.1	Police station ⁽¹⁾		6.2 CAS/Case number
6.3	Offence		
6.4	Police station ⁽²⁾		6.5 CAS/Case number
6.6	Offence		

7

HAVE ANY OF YOUR FIREARM(S) EVER BEEN LOST/STOLEN? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit the following details			
7.1	Police station ⁽¹⁾		7.2 CAS/Case number
7.3	Circumstances		
7.7	Details of firearm		
7.5	Police station ⁽²⁾		7.6 CAS/Case number
7.7	Circumstances		
7.8	Details of firearm		

8

WAS A CASE OF NEGLIGENCE OPENED AND INVESTIGATED REGARDING THE STOLEN/LOST FIREARM? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit the following details			
8.1	Police station ⁽¹⁾		8.2 CAS/Case number
8.3	Charge		8.4 Outcome
8.5	Police station ⁽²⁾		8.6 CAS/Case number
8.7	Charge		8.8 Outcome

9

HAVE YOU EVER BEEN DECLARED UNFIT TO POSSESS A FIREARM? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit the following details			
9.1	Police station ⁽¹⁾		9.2 CAS/Case number
9.3	Charge		
9.4	Date from		9.5 Period
9.6	Police station ⁽²⁾		9.7 CAS/Case number
9.8	Charge		
9.9	Date from		9.10 Period

10

HAS A FIREARM IN YOUR POSSESSION BEEN CONFISCATED? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit the following details			
10.1	Police station ⁽¹⁾		10.2 CAS/Case number
10.3	Circumstances		10.4 Outcome
10.5	Police station ⁽²⁾		10.6 CAS/Case number
10.7	Circumstances		10.8 Outcome

11

IN THE PAST FIVE YEARS HAVE YOU BEEN SERVED WITH A PROTECTION ORDER, OR VISITED BY A POLICE OFFICIAL CONCERNING ALLEGATIONS OF VIOLENCE OR OTHER CONFLICT IN YOUR HOME OR ELSEWHERE? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			

12

IN THE PAST FIVE YEARS HAVE YOU BEEN DENIED A LICENCE, PERMIT OR AUTHORIZATION REGARDING A FIREARM? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			
<div></div>			

13

IN THE PAST FIVE YEARS DID YOU THREATEN OR ATTEMPT SUICIDE, SUFFERED FROM MAJOR DEPRESSION OR EMOTIONAL PROBLEMS, OR ENGAGED IN INTOXICATING OR NARCOTIC SUBSTANCE ABUSE? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			
<div></div>			

14

IN THE PAST FIVE YEARS HAVE YOU BEEN DIAGNOSED OR TREATED BY A MEDICAL PRACTITIONER FOR DEPRESSION, DRUG, INTOXICATING OR NARCOTIC SUBSTANCE ABUSE, BEHAVIOURAL PROBLEMS OR EMOTIONAL PROBLEMS? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			
<div></div>			

15

IN THE PAST TWO YEARS DID YOU EXPERIENCE A DIVORCE OR SEPARATION FROM AN INTIMATE PARTNER WITH WHOM YOU RESIDED AND WHERE THERE WERE WRITTEN ALLEGATIONS OF VIOLENCE? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			
<div></div>			

16

IN THE PAST TWO YEARS HAVE YOU EXPERIENCED ANY FORCED JOB LOSS? (Indicate with an X)			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, submit details			
<div></div>			

17

IF YOU ARE UNDER THE AGE OF 21 YEARS, COMPELLING REASONS WHICH REQUIRE YOU TO OBTAIN A COMPETENCY CERTIFICATE MUST BE SUBMITTED.			
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17.1

*Compelling reasons (Indicate with an X)							
Conduct a business	<input type="checkbox"/>	Gainfully employed	<input type="checkbox"/>	Dedicated hunter	<input type="checkbox"/>	Dedicated sports-person	<input type="checkbox"/>
Public collector	<input type="checkbox"/>	Other	<input type="checkbox"/>				

17.2

Submit full details	<div></div>						
<div></div>							

18

DECLARATION BY APPLICANT

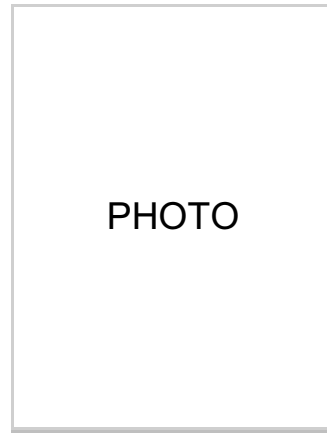
I am aware that it is an offence in terms of section 120 (9)(f) of the Firearms Control Act, 2000 (Act No 60 of 2000), to make a false statement in this application.

I. SIGNATURE OF APPLICANT (Sign only if applicable)

Note:

The requirements of the photo:

- The photograph must be in colour and may not exceed the border.
- The photo must be the size of a standard passport photograph.
- The photo must be a full front view of the head and shoulders of the applicant.
- The background of the photo must be plain.
- The applicant may not be wearing a hat or sunglasses on the photograph.
- The applicant's name and identification number must be written on the back of the photograph before it is affixed on the application form.
- The applicant must sign in black ink.
- The signature may not exceed the border.
- The whole finger must be pressed down on the sheet.
- The fingerprint should not be rolled and must be a flat impression.



1

⁴ Fingerprint designation

3

2

Signature

5

Name of applicant in block letters

6

Date					-			-		
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7

Place										
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8

PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

8.1

Name of police official in block letters

8.2

								-	
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Persal number of police official

8.3

Rank of police official in block letters

8.4

.....
Signature of police official

9

PARTICULARS OF WITNESS

9.1

Name of witness in block letters

9.2

								-	
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Persal number of witness

9.3

Rank of witness in block letters

9.4

.....
Signature of witness

* Submit proof of that indicated in par 11.1.

J. PARTICULARS OF INTERPRETER(This section must be completed only if the applicant cannot read or write or does not understand the content of this form.)

1

Name and surname of interpreter															
---------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2

Identity/Passport number of interpreter																	
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3

Residential address															
---------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5

Postal address															
----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

⁴ Postal Code⁶ Postal Code

13 14 Place

15	
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16							-	
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K.	PARENTAL CONSENT IN CASE OF A MINOR
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1	Recommended		Not recommended	
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2	Name and surname of parent/guardian	
---	-------------------------------------	--

[illegible]

4 Comments of parent/guardian

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There is no handwriting or other markings on the paper.

5	Date					-			-		
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6	_____ 7	Place	
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**L. FOR OFFICIAL USE BY THE POLICE OFFICIAL WHO CONDUCTS THE INTERVIEWS
(INTERVIEW REPORT)**

INTERVIEW 1 (With a person other than the applicant's spouse or partner)

1.1	SA ID		Passport		(Indicate with an X)																						
2	Identity number of interviewee												-					-					-				
3	Passport number of interviewee																										
4	Surname																		5	Initials							
6	Full names																										
7	Age					8	Gender		Male		Female		(Indicate with an X)														
9	Address																										
																			10	Postal Code							
11	Telephone number		11.1	Home		()				11.2	Work		()														
11.3	Cellphone number						12	Fax		()																	
13	The interviewee's relation to the applicant? (eg neighbour, employer, parents)																										
14	Comments of the interviewee																										
15	Date					-																					
16															16	Time											
17	Comments of the police official who conducted the interview																										
18	In what manner was the interview conducted? (eg in person, by telephone)																										
19	Date					-																					
20															20	Time											

21											22										
Name of police official in block letters										Persal number of police official											
23											24										
Rank of police official in block letters										Signature of police official											

INTERVIEW 2 (With a person other than the applicant's spouse or partner)

25.1	SA ID		Passport		(Indicate with an X)																						
26	Identity number of interviewee													-					-					-			
27	Passport number of interviewee																										
28	Surname																		29	Initials							
30	Full names																										
31	Age					32	Gender		Male		Female		(Indicate with an X)														
33	Address																										
																			34	Postal Code							
35	Telephone number		35.1	Home		()				35.2	Work		()														

65	In what manner was the interview conducted? (eg in person, by telephone)	
66	<div style="display: flex; align-items: center;"> <div style="width: 100px; height: 20px; background-color: #cccccc; margin-right: 5px;">Date</div> <div style="display: flex; gap: 5px;"> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black; text-align: center;">-</div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> </div> </div>	
67	<div style="border: 1px solid black; height: 20px; width: 280px;"></div> <p style="margin-top: 5px;">Name of police official in block letters</p>	68
		<div style="display: flex; gap: 5px;"> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black; text-align: center;">-</div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> </div> <p style="margin-top: 5px; text-align: center;">Persal number of police official</p>
69	<div style="border: 1px solid black; height: 20px; width: 280px;"></div> <p style="margin-top: 5px;">Rank of police official in block letters</p>	70
		<p>.....</p> <p style="text-align: center;">Signature of police official</p>
71	OTHER DETAILS (To be completed by the Designated Firearms Officer)	
72	Describe the health and physical fitness of the applicant	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	
73	Describe the mental condition of the applicant and indicate whether he/she is inclined to act violently	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	
74	General impression of the applicant's character, including his or her temper and emotional and behavioural stability	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	
75	Is the applicant dependant on any substance which has an intoxicating or narcotic effect? If yes, submit details	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	
76	Are there any negative aspects known about the applicant? If yes, submit details	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	
77	Does the applicant have a criminal history? If yes, submit details	
	<div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div> <div style="border-bottom: 1px dotted black; height: 20px;"></div>	

79

79.1

79.2

1

1.1

2

3

4

5

6

7

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