



NORTHERN TERRITORY POLICE

Section 22 – Firearms Act

APPLICATION FOR AN ARMOURER'S LICENCE

Note: An Armourer's Licence will not be issued until premises is inspected and approval given on each new or reissue of licence application

To be filed with Armourer's Licences

POLICE USE ONLY	
Firearm Licence No:	
Receipt No:	
Fee Charged: \$.....	

Surname:		Given Name:		Middle Name(s):	
Date of Birth:..... / /		Sex: Male <input type="checkbox"/>		Home Phone Number:	
Place of Birth:.....		Female <input type="checkbox"/>		Mobile Number:	
Residential Address (Number, Street, Suburb):				Post Code:	
Postal Address (PO Box Number, Town/City):				Post Code:	
Occupation:		Name of Employer:		Business Phone Number:	
ARMOURER	Name of Business:		Business Address (Number, Street, Suburb):		
	Days and Hours of Business:				

Please tick appropriate box Grade Licence for: **Grade 1** **Grade 2**

I hereby apply for a licence to deal in / store firearms of Categories: **A** **B** **C** **D** **H**

Do you have, or have you ever had, a Domestic Violence Order or Restraining Order issued against you? (including Interstate and Overseas)	<input type="checkbox"/> No	<input type="checkbox"/> Yes Details,
Have you ever been convicted or charged with any kind of offence, not involving minor traffic offences? (including Interstate and Overseas)	<input type="checkbox"/> No	<input type="checkbox"/> Yes Details,
Have you ever suffered, been treated for or diagnosed of any psychological or mental disorder?	<input type="checkbox"/> No	<input type="checkbox"/> Yes Details,

- I have resided in the NT for years. Attach a list of addresses resided at for the past five years if different from current.
- My reasons for requiring the Armourer's licence are outlined in the attached letter.
- My qualifications for repairing firearms are attached as supporting documentation to the application letter (First time applicants only).
- The premises to be use is: rented leased my own property other (describe)
If not your own property, who owns the premises?.....
- The premises is a permanent building: Yes No
- I am / will be in charge of the premises upon the grant of the licence: Yes No
- For the safekeeping of firearms, all the premises utilized in the conduct of the Armourers must be inspected upon each application: complete a PF482 "Permission to Inspect "and attach.
- Have you made a previous application relating to this Act: Yes No
- Have you ever been refused, or had, a licence, permit or registration revoked relating to this act: Yes No
If yes, include these details in Application Letter attached.

I solemnly and sincerely declare that the above particulars contained in this application are true and correct. I make this application under the <i>Firearms Act</i> and acknowledge to make a false statement in an application is an offence under Section 89(1) of that Act.	Declared at (Police Station):
Signature of applicant:.....Date:...../...../.....	
PRINTED NAME:.....	

PENALTY: 100 PENALTY UNITS OR 2 YEARS IMPRISONMENT FOR FALSE OR MISLEADING STATEMENT

RECEIVING MEMBER TO COMPLETE

Signature of member receiving application:	Member PRINT:..... Position / Rank / Reg No:.....	Date Received:/...../.....
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POLICE USE ONLY

CHARACTER / CONVICTION CHECKS

<input type="checkbox"/> PROMIS check completed (by member receiving application)	<input type="checkbox"/> Unknown – New PROMIS ID: <input type="checkbox"/> Known – PROMIS ID: Criminal / Traffic History: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Involvements: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Alerts / Warrants: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details,	
<input type="checkbox"/> IJIS check completed (by member receiving application)	<input type="checkbox"/> Unknown <input type="checkbox"/> Known – IJIS ID: Criminal / Traffic History: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Domestic Violence / Restraining Orders: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Other Orders: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details,	
<input type="checkbox"/> NPRS check completed (by member receiving application)	<input type="checkbox"/> Unknown <input type="checkbox"/> Known - NPRS ID: Criminal / Traffic History: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Domestic Violence / Restraining Orders: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details, Other Orders: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details:.....	

**FOR POLICE USE ONLY – scan application & email to the FPRU.
PETER MCAULAY CENTRE, DARWIN**

Tel: 131 444 Fax: 08 89223540 Email: firearmsregistry@pfes.nt.gov.au

For more information visit: <http://www.pfes.nt.gov.au/Police/Firearms-Weapons/Firearms-licences-permits-forms.aspx>

FPRU USE ONLY

<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED
Reason Category:	Reason Code:
Condition Codes:	
Signature:	Position/Rank: Date: / /