



# NORTHERN TERRITORY POLICE

Northern Territory *Firearms Act 1997*

## APPLICATION FOR FIREARMS CORPORATE / MUSEUM LICENCE

Read the instructions attached before completing the form.  
**TO BE LODGED IN PERSON AT A NORTHERN TERRITORY (NT) POLICE STATION**

**CORPORATE**

**MUSEUM\*** Please tick  appropriate box

\*A Museum Licence will not be issued until premises is inspected and approval given on each (new or existing licence) application.

### POLICE USE ONLY

NT Firearms Licence No:

Fee: .....

Receipt No: .....

Date: ..... / ..... / .....

PROMIS ID created: .....

### Section 1: Firearms Categories (\*see note) Please tick appropriate boxes

Category of Firearm Required: Corporate / Museum				
<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> H

\*Note: An application for a Category C, D or H firearm MUST provide additional supporting documentation.

### Section 2: Personal Details Please tick appropriate box

Employee Representative Details				
Job Title*:				
Surname:		Given Name:		Middle Name:
Date of Birth	DD / MM / YYYY	Sex	Male <input type="checkbox"/>	Female <input type="checkbox"/>
			Other <input type="checkbox"/> (Indeterminate/Intersex)	
Place of Birth	Town	State		Country
Home Phone Number		Work Phone Number		Mobile Phone Number
Email:				
Current Residential Address				Post Code
Current Postal Address				Post Code
Drivers Licence Number: .....		NT / Interstate Firearms Licence Number: .....		
State..... Expiry Date.....		State: ..... Expiry Date.....		

\*Job Title: Owner /Operator, Owner/ Manager, Manager, Operations Manager, Leaseholder/Manager, Head Stockman/Overseer, etc.

### Section 3: Business / Corporate Details

Business / Corporate Contact Details	
Business Name:	Corporate Firearms Licence No:
Business Phone Number:	Business Mobile Number:
Business Email:	ABN / ACN Number:
Business Physical Address (Not PO Box):	Post Code:
Business Postal Address:	Post Code:

### Section 4: Reason for Licence (\*Refer to Instructions for additional information)

Reason for Licence
Brief description only. Attach detailed description and all supporting documents as requested in the Information Sheet. ..... .....



**Section 5: Storage Address**

Storage Details
Storage of firearms when not in use: My storage / security facilities are located (Provide full address including Post Code): ..... .....

**Section 6: Firearms Safety and Training Program**

Firearms Safety Training Details
The following Firearms Safety and Training Program is planned / in force for all employees using the Company firearms: ..... ..... .....
Attach detailed description and all supporting documents

**Section 7: Particulars of Employees (\*see note)**

Particulars of Employees using or intending to use or have access to Company / Museum Firearms			
Full Name (First Name, Surname)	Date of Birth (DD-MM-YYYY)	Employees Licence Number	Occupation / Role within the Organisation / Company

\*Note: Attach additional list of Employees on a separate page (if required). Request and complete an "Employee Audit" list from FPRU.

**Section 8: Particulars of Firearms (\*see note)**

Particulars of Firearms kept under and / or used for the Corporate / Museum Licence							
Category	Make / Brand	Model	Serial Number	Action Type	Calibre (e.g. 300 Win Mag)	Capacity	Barrel Length (Cat H only)

