



SOUTH AFRICAN POLICE SERVICE

**APPLICATION FOR MULTIPLE IMPORT OR EXPORT PERMIT/
PERMANENT IMPORT OR EXPORT PERMIT/TEMPORARY IMPORT OR
EXPORT PERMIT/IN-TRANSIT PERMIT FOR PERSONAL USE
(Individuals and companies)**

Section 73(2), 74, 76, 77, 78, 80, 81 and 82 of the Firearms Control Act, 2000 (Act No 60 of 2000)

OFFICIAL DATE STAMP
DATE RECEIVED

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS CAPTURED									
¹ Application reference No									

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

C. FOR OFFICIAL USE BY THE DECIDING OFFICER									
¹ Outstanding/Additional information required									
					-				
² Persal number								-	
								³ Date	
.....					[]				
⁴ Signature of police official					⁵ Name in block letters				
⁶ Application for a permit approved (Indicate with an X)									
					-				
⁷ Persal number								-	
								⁸ Date	
.....					[] [] []		[]		
⁹ Signature of deciding officer					¹⁰ Officer code		¹¹ Name in block letters		
¹² Application for a permit refused (Indicate with an X)					¹³ Reason(s) for refusal				
					-				
¹⁴ Persal number								-	
								¹⁵ Date	

27	Registered company name																			
28	Trading as name																			
29	FAR number																			
30	Postal address																			
														31 Postal Code						
32	Business address																			
														33 Postal Code						
34	Business telephone number	34.1 Work	()	34.2 Fax	()													
35	E-mail address																			

RESPONSIBLE PERSON'S DETAILS

37	Responsible person (full name and surname)																			
38	Type of identification (Indicate with an X)	SA citizen					Non-SA citizen with permanent residence*													
39	Identity number of responsible person							-						-					-	
40	Passport number of responsible person																			
41	Cellphone number																			
42	Physical address																			
														43 Postal Code						
44	Postal address																			
														45 Postal Code						
46	Type of competency certificate (If applicable)																			
47	Date of issue							-						-					-	
		48 Expiry date																		

F. PARTICULARS OF THE CURRENT OWNER OF THE FIREARM(S)

NATURAL PERSON'S DETAILS

2	Surname													3 Initials						
4	Full names																			
5	Identity number of natural person							-						-					-	
6	Passport number of natural person																			
7	Residential address																			
														8 Postal Code						
9	Postal address																			
														10 Postal Code						
11	Telephone number	11.1 Home	()	11.2 Work	()													
11.3	Cellphone number					12 Fax	()												
13	E-Mail address																			

JURISTIC PERSON'S DETAILS

15	Registered company name															
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2	Transporter's name and surname																				
3	Transporter's trading name																				
4	Method of transport																				
5	Transporter's responsible person (name and surname)																				
6	Type of identification (Indicate with an X)	SA citizen						Non-SA citizen with permanent residence*													
7	Identity number of responsible person						-					-					-				
8	Cellphone number																				

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

DECLARATION BY PERSON WHO IS LAWFULLY IN POSSESSION OF THE FIREARM(S)

I hereby declare that the above firearm(s) is/are legally in my possession and that I propose to supply it to the applicant once the necessary permit(s) has/have been obtained and that the particulars of the firearm(s) are correct and accurate.

SIGNATURE OF PERSON CURRENTLY IN POSSESSION

4.1
Name of person currently in possession in block letters

4.2 Date -

4.3
Signature of person currently in possession

4.4 Place

DECLARATION OF 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.

J. SIGNATURE OF APPLICANT (Sign only if applicable)

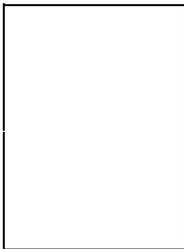
1
Name of applicant in block letters

2 Date -

3
Signature of applicant

4 Place

K. (This section must be completed only if the applicant cannot read or write)



2 Fingerprint designation



Right index fingerprint of applicant

3 Date -

4
Name of applicant in block letters

5 Place

PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION

6.1
Name of police official in block letters

6.2 -
Persal number of police official

6.3
Rank of police official in block letters

6.4
Signature of police official

PARTICULARS OF WITNESS

7.1
Name of witness in block letters

7.2 -
Persal number of witness

7.3
Rank of witness in block letters

7.4
Signature of witness

L. 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	<input type="text"/>
2 Identity/Passport number of interpreter	<input type="text"/>

3

Residential address				
	Postal Code			

