PF439
Revised 12/18

NORTHERN TERRITORY POLICE

Section 26 / 29 – *Firearms Act*

APPLICATION FOR – ☐ CORPORATE ☐ MUSEUM* - LICENCE

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

*** Note: Application must be made by Authorised Nominee of Business/Company – attach authorising documentation if first application or if signatory is different to person previously nominated on licence.**

Business Name:			
Business Address (Number, Street, Suburb):			Post Code:
Postal Address (PO Box Number, Town/City):			Post Code:
Business ABN Number:	Business Phone Number:	Business Mobile:	Business email:

Firearm category required: ☐ **A** ☐ **B** ☐ **C** ☐ **D** ☐ **H**

Summary of reason for licence: (Attach explanatory letter and supporting documentation as requested in the Information Sheet for Corporate Licences).

……

……

Location/Storage of firearms when not in use: .....

……

.....

The following **Firearms Safety and Training Program** is planned/in force for all employees using the Company firearms: .....

……

……

All Employees using, or intending to use, the company firearms (if insufficient space, attach documentation)

FULL NAME	DATE OF BIRTH	EMPLOYEES LICENCE NUMBER	OCCUPATION

See overleaf to complete application

- Firearms ownership is not a right, it's a responsibility –

LIST ALL FIREARMS KEPT UNDER OR USED FOR THE CORPORATE LICENCE						
MAKE / BRAND	**MODEL**	**SERIAL NO.**	**ACTION TYPE**	**CALIBRE & CALIBRE TYPE**	**CAP**	**Barrell Length (Cat H)**

DECLARATION

Privacy Disclaimer Northern Territory Police Fire and Emergency Services (NTPFES) is collecting information on this form to ensure compliance with legislation and to ensure the Commissioner of Police can satisfy him/herself of a number of matters related to the issuing of firearms licenses, permits and registration. This collection is authorized or required by the NT *Firearms Act* and *Regulations*. Through national agreements the NTPFES will provide some or all of this information to other agencies with a direct interest in firearm permits, licensing, and registration. Failure to provide this information in full or in part may result in your application not being processed or being refused.

You can access your personal information provided on this form. If you have any queries or wish to access this information please contact NTPFES by phoning 08 8999 5511 (NT Government Switch).

I solemnly and sincerely declare that the above particulars contained in this application are true and correct. I make this application under the *Firearms Act* and acknowledge to make a false statement in an application is an offence under Section 89(1) of that Act Signature of applicant:..... Date: ..... / ..... /	Declared at (Police Station): .....
Must be an Authorised Nominee Printed name of applicant:..... Title: …….....	

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

- Firearms ownership is not a right, it's a responsibility -

RECEIVING MEMBER TO COMPLETE

Signature of member receiving application:	Member (printed):	Rank / Reg No:	Date:
.....	.....	.....	.....

COMPLETED APPLICATION MUST BE SCANNED TO SAFER AND EMAILED TO

firearmsregistry@pfes.nt.gov.au

RETAIN THE ORIGINAL FORM AT RECEIVING STATION

FIREARMS POLICY AND RECORDING UNIT (FPRU), PETER MCAULAY CENTRE, DARWIN

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

☐ **APPROVED** ☐ **NOT APPROVED**

Signature: ..... Position/Rank: ..... Date: ..... / ..... / .....