



NORTHERN TERRITORY POLICE

Northern Territory *Firearms Act*

TO BE LODGED IN PERSON AT A NT POLICE STATION

POLICE USE ONLY

Firearm Licence No:

Receipt No:

Fee Charged:

SELECT ONLY ONE LICENCE TYPE PER APPLICATION

PLEASE TICK APPROPRIATE BOXES **NOTE: NOT TO BE USED FOR EMPLOYEES LICENCE APPLICATIONS**

Surname:		Given Name:		Middle Name(s):	
Date of Birth:	Gender:	Home Phone Number:			
Place of Birth:	Male <input type="checkbox"/>	Mobile Phone Number:.....			
	Female <input type="checkbox"/>	Email:.....			
Residential Address:				Post Code:	
Postal Address:				Post Code:	

Occupation:		Name of Employer:			
Business Phone Number:		Address of Employer:			
Drivers Licence: State:..... Number:.....		Interstate Shooters Licence: State:.....Numbers:.....			

Failure to Disclose Information May Result in Refusal of this Application

Do you have, or have you ever had, a Domestic Violence Order or other similar Restraining Order issued against you? (including Interstate and Overseas) No Yes

Have you had a finding of guilt against you in the past 10 years, for any offence, not including minor traffic offences, but including:
 - Interstate or overseas findings of guilt;
 - Finding of guilt acquired whilst under the age of 18; No Yes

Have you ever been diagnosed with a mental health disorder e.g. chronic depression, PTSD? (If yes please provide a report from your treating GP in support of your application.) * No Yes

Have you ever threatened or attempted self-harm? (If yes please provide a report from your treating psychiatrist in support of your application.)* No Yes

***Note** – The medical reports MUST state that the treating doctor or psychiatrist “does not consider the applicant a risk to themselves or others if granted a firearms licence”.

FIREARM LICENCE TYPE CATEGORY - PLEASE TICK <input checked="" type="checkbox"/> APPROPRIATE					
SHOOTERS LICENCE		TEMPORARY PERMIT		HANDGUN CLUB	
<input type="checkbox"/> A and B	<input type="checkbox"/> H (PILOT)	<input type="checkbox"/> A and B	<input type="checkbox"/> H	<input type="checkbox"/> Sports Shooters Permit	<input type="checkbox"/> Junior Club Licence
<input type="checkbox"/> C (Firearm Club only)		<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> Cat H Sport Shooters Licence	

Reason for Temporary permit:.....

Permit period from:/...../..... to/...../.....(If applicable attach a list of firearm(s) that will be used with this Permit in the NT).

DECLARATION	
<p>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 licences, permits and registration. This collection is authorised or required by the NT <i>Firearms Act</i> and <i>Regulations</i>. 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.</p> <p>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).</p>	
<p>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.</p> <p>Signature of applicant:..... Date: / /</p> <p>PRINTED NAME:.....</p>	<p>Declared at:</p> <p>.....</p>

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

RECEIVING MEMBER – See overleaf to complete application
 - *Firearms ownership is not a right, it's a responsibility* –

WRITTEN FIREARMS SAFETY EXAMINATION - POLICE USE ONLY

Completed and attached

Not Completed – Reason Renewal Interstate Transfer

Holds current NT FTSC (Firearm Training Safety Certificate)
 (NOTE – Valid for 5 years from date of issue)

New Photograph taken (email to: firearmsregistry@pfes.nt.gov.au) **NOTE:** Supporting documentation **must** be attached

Application updated on SAFER Yes No If No reason:

CHARACTER / CONVICTION - POLICE USE ONLY

<input type="checkbox"/> PROMIS check completed (by member receiving application)	<input type="checkbox"/> Unknown – New PROMIS ID:
	<input type="checkbox"/> Known – PROMIS ID'S list all:.....
Criminal / Traffic History: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes:	<input type="checkbox"/> Not relevant (old / minor / not criminal)
	<input type="checkbox"/> Relevant, Attach printout of details
Involvements: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes:	<input type="checkbox"/> Not relevant (old / minor / not criminal)
	<input type="checkbox"/> Relevant, Attach printout of details
Alerts / Warrants / DVO'S: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes	<input type="checkbox"/> Not relevant (old / minor / not criminal)
	<input type="checkbox"/> Relevant, Attach printout of 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"/> No <input type="checkbox"/> Yes If yes	<input type="checkbox"/> Not relevant (old / minor / not criminal)
	<input type="checkbox"/> Relevant, Attach printout of details
Domestic Violence Orders Personal Violence Orders Restraining Orders <input type="checkbox"/> No <input type="checkbox"/> Yes If yes	<input type="checkbox"/> Not relevant (more than 6 years old)
	<input type="checkbox"/> Relevant (less than 6 years old). Attach printout of details
Other History / Orders <input type="checkbox"/> No <input type="checkbox"/> Yes If yes	<input type="checkbox"/> Not relevant (old / minor / not criminal)
	<input type="checkbox"/> Relevant, Attach printout of details
<input type="checkbox"/> NFLRS check completed (if required) (Interstate Licence Transfer)	<input type="checkbox"/> Current <input type="checkbox"/> Expired
	<input type="checkbox"/> Not relevant
	<input type="checkbox"/> Relevant, Attach printout of details
Interstate Firearms Registered <input type="checkbox"/> No <input type="checkbox"/> Yes If yes	<input type="checkbox"/> No Outstanding Firearm(s) – supplied Transfer Permits for all
	<input type="checkbox"/> Yes Outstanding Firearm(s), Attach printout of details/declarations
<input type="checkbox"/> NPRS check completed	<input type="checkbox"/> Known <input type="checkbox"/> unknown
	<input type="checkbox"/> Not relevant
	<input type="checkbox"/> Relevant, Attach printout of details

RECEIVING MEMBER TO COMPLETE

Signature of member receiving application:	Name, Position / Rank (printed):	Reg. No.:	Date Received/...../.....
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A COMPLETED APPLICATION MUST BE COMMENCED ON SAFER AND ALL DOCUMENTS SCANNED TO SAFER AND SEND COURTESY EMAIL TO firearmsregistry@pfes.nt.gov.au

RETAIN THE ORIGINAL FORM AT RECEIVING STATION

FPRU USE ONLY

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

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>