APPLICATION FOR REGISTRATION CANCELLATION OF REGISTRATION OF PRIVATELY OWNED FIREARMS												
NAME (Last, First, Middle Initial) GRADE SSN		SSN	SN ORGANIZATION				DEROS					
		l	1					DUTY PHONE NO.:				
PRIVACY ACT STATEMENT												
1. AUTHORITY: 10 U.S.C. 8012; 44 U.S.C. 3101; and EO 9397.												
2. PRINCIPAL PURPOSE: To record personal information on an individual who registers and stores his or her privately owned weapons on an army installation or facility.												
	IE USES: To maintain accounta stallation. Routine use could inc							rs and location of privately owned weapons retrieving from the files.				
4. DISCLO the insta	SURE IS VOLUNTARY: Failure llation weapons which are not p	to disclose th roperly registe	e information to include SS ered or stored could result	SN will result in the indiv in confiscation of the we	ridual not being eapons, discipli	able to regis nary action,	ster or store weapor or both.	ns on the installation. Attempts to keep on				
WEAPON NUMBER	TYPE (Rifle, Shotgun, etc.)		MAKE (Manufacturer)	CALIBER GAUGE	SERIAL NUMBER		SIGN	SIGNATURE OF REGISTER (PMO USE ONLY)				
1												
2												
3												
4												
5												
6												
7												
8												
	THE ABOVE NAM	1ed individu	IAL IS AUTHORIZED TO (C	heck appropriate box)			GISTERING AUTHO	DRITY (Typed Name, Grade, Title, and Office				
ST	ORE FIREARMS IN THE UNIT AI	MS STORAG	E FACILITY LOCATED IN E	BLDG:								
ST	ORE FIREARMS IN THE ROD &	GUN CLUB FA	ACILITY LOCATED AT (INS	TAL):								
SIGNATURE OF UNIT COMMANDER OR CUSTODIAN, ROD AND GUN CLUB				DATE		I HAVE READ USFK REG 190-8 AND WILL COMPLY.						
							SIG	NATURE OF OWNER				

RECORD OF TEMPORARY WITHDRAWALS BY OWNER AND RETURN TO STORAGE LOCATION									
WEAPON NUMBER	MAKE	TEMPORARY WITHDRA		RETURN TO STORAGE					
		SIGNATURE OF OWNER	DATE	SIGNATURE OF OWNER	DATE				
REMARKS:									