



SOUTH AFRICAN POLICE SERVICE

PERMISSION TO STORE A FIREARM IN TERMS OF REGULATION 86(4) OF THE FIREARMS CONTROL REGULATIONS, 2004

A. DETAILS OF LICENCE, PERMIT OR AUTHORIZATION HOLDER OF FIREARM

Form section A containing fields for Full names, Surname, Identity number, Physical address, Telephone number (Work/Home), and Cellphone number.

B. DETAILS OF FIREARM TO BE STORED

Form section B containing fields for Date licence was issued, Serial number, Make, Calibre, and Action.

I hereby grant permission in terms of regulation 86 of the Firearms Control Regulations, 2004 to:

Name and surname of person who will store the firearm to possess my firearm, serial number

for the period Date to Date

Reason for storage field

C. DETAILS OF LICENCE HOLDER WITH WHOM FIREARM WILL BE STORED

Form section C containing fields for Full names, Surname, Identity number, Physical address of storage, Telephone number (Work/Home), and Cellphone number.

Date licence was issued and Serial number fields

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Prescribed safe on premises?	YES		NO	
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(Indicate with an X)

I declare that the details provided by me on this form are true and correct.

I furthermore, declare that I know it is an offence in terms of section 39(1)(f) on the Firearms Control Act, Act 60 of 2000 to knowingly make any false statement on this form.

11

.....  
Signature of licence, permit and authorization holder

13

Police station

15

Name of Designated Firearms Officer in block letters

17

.....  
Signature of Designated Firearms Officer

12

Date					-							
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14

Date					-							
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16

Rank of Designated Firearms Officer in block letters

18

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Persal number of Designated Firearms Officer