



## INFORMATION SHEET

### Application for a Possession and Acquisition Licence Under the *Firearms Act* (For Individuals Aged 18 and Over)

#### **BEFORE YOU START...**

**USE THIS FORM** if you are an individual aged 18 and over to apply:

- for a first time licence,
- for a new licence if your current licence has expired,
- for a Possession and Acquisition Licence (PAL) for a different class of firearm,
- for a Possession and Acquisition Licence (PAL) if you currently have a Possession Only Licence (POL).

**DO NOT USE THIS FORM** to apply to renew your still existing and valid firearms licence. Call 1 800 731-4000 and ask for form "Application for Renewal of a Firearms Licence" (RCMP GRC 5614 / CAFC 979).

#### **PLEASE NOTE**

- **You must complete all sections of the form. An incomplete form will cause delays in processing your application.**
- Processing a firearms licence application involves a variety of background checks. In some cases, in-depth investigations are conducted. We require a minimum of forty-five (45) days to process your application.
- Once your licence application has been fully processed and you have met the eligibility criteria, you will be issued a Possession and Acquisition Licence (PAL).
- There is a minimum 28-day waiting period for all applicants who do not presently hold a valid firearms licence. A PAL is valid for a period of five (5) years.

**SAFETY TRAINING** If you are applying for a Possession and Acquisition Licence (PAL) for non-restricted firearms, you must have passed the test for the Canadian Firearms Safety Course (CFSC). If you are applying for a PAL for restricted firearms, you must have passed two safety tests: the CFSC and the Canadian Restricted Firearms Safety Course (CRFSC). See Section G for further information, or call 1 800 731-4000.

**IF YOU NEED ADDITIONAL SPACE**, list all information requested on a separate sheet of paper, add your name and licence number (if applicable) to the top of each sheet and attach the sheet to your application.

**IF YOU NEED HELP COMPLETING THIS APPLICATION FORM** or require another form, call 1 800 731-4000. Additional information and some application forms are also available on our Web site at [www.cfc-cafc.gc.ca](http://www.cfc-cafc.gc.ca).

The following information explains certain parts of the form and will help you answer some of the questions. You should read the instructions as you fill in your form. If you are still unsure about a question, call 1 800 731-4000 for assistance.

Mail your completed application form, all attachments and enclosed payment, if you are paying by cheque or money order, to:

**Central Processing Site**  
P.O. Box 1200  
Miramichi, N.B. E1N 5Z3

#### **A - LICENCE INFORMATION**

##### **Box 2 b)**

Note: The licence issued to you and fees are based on the firearms you currently possess and the firearms you intend to acquire and possess.

In general, you cannot request possession and acquisition of prohibited firearms unless you already lawfully possess a prohibited firearm and are changing your licence from a Firearm Acquisition Certificate (FAC) or Possession Only Licence (POL) to a Possession and Acquisition Licence (PAL).

If you are applying for a licence to acquire a prohibited handgun manufactured before 1946, please call 1 800 731-4000 for further information.

The following definitions may help you complete Box 2.

##### **A Non-restricted firearm is:**

- an ordinary rifle, shotgun or combination gun that is not described below as being restricted or prohibited.

##### **A Restricted firearm is:**

- a handgun that is not a prohibited firearm;
- a semi-automatic, centre-fire rifle or shotgun with a barrel length less than 470 mm (18.5 inches) that is not prohibited;
- a rifle or shotgun that can fire when its overall length is reduced by folding, telescoping or some other means to less than 660 mm (26 inches);
- any firearm prescribed as restricted (including some long guns).

### **A Prohibited firearm is:**

- a handgun with a barrel length of 105 mm (4.1 inches) or less;
- a handgun designed or adapted to discharge 25 or 32 calibre ammunition;
- a rifle or shotgun that has been altered to make it less than 660 mm (26 inches) in overall length;
- a rifle or shotgun that has been altered to make the barrel length less than 457 mm (18 inches) where the overall firearm length is 660 mm (26 inches) or more;
- an automatic firearm and a converted automatic firearm;
- any firearm prescribed as prohibited.

Visit our Web site at [www.cfc-cafc.gc.ca](http://www.cfc-cafc.gc.ca) for a list of firearms restricted or prohibited under *Criminal Code* regulations.

### **Box 3**

#### *Aboriginal Peoples of Canada Adaptations Regulations (Firearms)*

Regulations that apply particularly to Aboriginal Peoples have been made under the *Firearms Act*. To apply under these regulations, you must:

- be an Indian, an Inuit, a Métis or beneficiary under a land claims agreement referred to in section 35 of the *Constitution Act, 1982*;
- be a member of an Aboriginal community; and
- engage in the traditional hunting practices of that Aboriginal community.

If you are applying under these Regulations and require a form, call 1 800 731-4000 for further information and ask for an "*Aboriginal Peoples of Canada Adaptations Regulations (Firearms) Application*" (CAFC 1016).

## **B - PERSONAL INFORMATION**

### **Boxes 5 a), b) and c)**

Please do not use initials or nicknames. Your last, first and middle name must be written in full. Junior (Jr.) or Senior (Sr.) can only be used if they form part of your legal name. If Junior (Jr.) or Senior (Sr.) form part of your legal name please provide a photocopy of an official piece of documentation issued by a municipal, provincial or federal government that bears your full name.

### **Box 6**

If you have changed your name several times, please indicate the most recent previous name on the form and list all other previously used names on a separate sheet. Return this sheet with your completed application.

## **PROOF OF IDENTITY**

### **Box 13 a) Type of identification**

Print the type of identification used to prove your identity. For example, if you use your provincial or territorial driver's licence, print "Driver's licence" in Box 13 a).

Examples of other types of identification you may use to prove your identity are:

- Federal, provincial, territorial or municipal employee identification card
- Passport
- Birth certificate
- Citizenship certificate
- Permanent resident document

**Do not send original documents or photocopies with your application. Only provide the information requested.**

## **HOME ADDRESS**

### **Box 14 a) Street or land location**

If you live in a rural area and do not have an address with a street number and name, provide your rural address (for example: lot and concession number). If you live on a reserve, provide the reserve number, or if you live in an Inuit community, provide your house number, box number or lot number. If your legal land location is unavailable please provide a general description of your home location e.g. 2 km east of route 6.

## **C - PERSONAL HISTORY**

All questions in Section C must be answered by all applicants.

### **New Canadian Residents**

If you have been a resident of Canada for less than 5 years you must obtain a letter of good conduct issued by the local or state police of your previous country of residence.

### **Non-Residents of Canada**

If you are a non-resident of Canada you must obtain a letter of good conduct issued by your local or state police.

### **Letter of Good Conduct Required for New Canadian Residents and Non-Residents of Canada Only**

A letter of good conduct must be written in the English or French language on the police department's official letter head paper. Please attach the letter to your application form.

## **E and F - INFORMATION ABOUT CURRENT AND FORMER CONJUGAL PARTNERS**

Conjugal partner includes spouses and common law partners and all other persons with whom you live or have lived in a similar relationship within the last 2 years.

A spouse is a person to whom you are legally married. A common-law partner is a person who is cohabiting with you in a conjugal relationship, having so cohabited for a period of at least one year.

### **Boxes 18 and 19**

The signature(s) of your current or former conjugal partner(s) is not legally required. However, if their signature(s) is not provided, the Chief Firearms Officer has a duty to notify them of your application for a firearms licence.

## **G - SAFETY TRAINING CERTIFICATION**

### **Box 20 a)**

To get a Possession and Acquisition Licence (PAL) for non-restricted firearms, you must have passed the test for the Canadian Firearms Safety Course (CFSC). Complete Box 20 a) if this applies to you.

### **Box 20 b)**

To get a Possession and Acquisition Licence for restricted or prohibited firearms, you must have passed two safety tests: the Canadian Firearms Safety Course (CFSC) and the Canadian Restricted Firearms Safety Course (CRFSC). Complete Box 20 b) if this applies to you. **NOTE:** If you passed the CFSC before February 1, 1999 you are considered to have met both these requirements.

If you have your Canadian Firearms Safety Course Report, provide a photocopy of this document with your application.

### Box 20 c)

In the provinces of Manitoba and Quebec only, many hunter safety or similar courses taken prior to 1995 were approved as being equal to the CFSC requirement. If this applies to you, complete Box 20 c), including the name of the course. If you are unsure, call 1 800 731-4000.

Chief Firearms Officers have the authority to alternatively certify that you meet the requirements regarding the safe handling and use of firearms and the laws relating to firearms. To qualify for alternative certification, you must have been in continuous possession of a firearm since January 1, 1979. If you have proof that you were alternately certified, check YES in Box 20 c) and provide a photocopy of it with your application.

## I - PHOTO GUARANTOR

A photo guarantor is a person who confirms that the photograph you supply accurately identifies you. Your photo guarantor must have known you for at least one (1) year and must be at least 18 years old. Your spouse or your common-law or other conjugal partner or one of your references can be your guarantor.

You must provide a current photograph of yourself. Your guarantor must sign his or her name on the enclosed photo sticker. Refer to the PHOTO INSTRUCTIONS below for more details.

## J - FEES

If you are applying for a Possession and Acquisition licence for the **first** time, the fees are based on the firearms you currently possess and the firearms you intend to acquire and possess.

The fee for a Possession and Acquisition Licence depends on the class of firearm(s) you are applying to acquire and already possess as indicated in Section A - LICENCE INFORMATION. If you have indicated either restricted or prohibited firearm(s) in **Box 2**, the fee is **\$80**. Otherwise, the fee is **\$60**. **The fee is non-refundable.**

Indicate the method of payment. Do not send cash. Make cheque or money order payable to Receiver General for Canada.

Please note: If paying by personal cheque, allow a minimum of ten (10) business days for bank clearance.

Administrative fees and any applicable interest will be applied to all dishonoured payments.

If you are a non-resident of Canada, please make your fee payable in Canadian dollars.

### Fee waivers

You may not be required to pay the fee for a licence for non-restricted firearms if you need the firearms to hunt or trap in order to sustain yourself or your family. This fee waiver does not apply to restricted or prohibited firearms. Please contact the Chief Firearms Officer of your province or territory for further information.

**If you have previously held a firearms licence under the Firearms Act, do not enclose a fee.**

**However a fee is required if your previous licence was a Minors Possession licence or your licence was revoked.**

## CHECKLIST

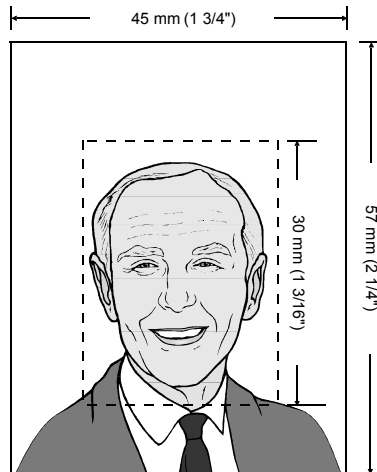
Before mailing your application, have you...

- answered all questions?
- obtained all necessary signatures?
- enclosed the applicable fee if applying for a firearms licence for the first time?
- attached your photo with the signed sticker on the back?
- attached a copy of your safety course report (if you have it)?
- attached a separate sheet of paper with additional information if necessary?
- signed and dated the declaration?
- enclosed your completed application and any additional information in the envelope provided?

## PHOTO INSTRUCTIONS

**You are not required to submit a passport type photograph or a photograph that has been taken by a professional photographer. However your photograph must meet the following criteria:**

- Show a full front view of your head and shoulders.
- Use a plain, contrasting background without shadows.
- Do not wear a hat or sunglasses. Your eyes should be clearly visible and should not appear to be red.
- The photo should have been taken within the last twelve (12) months.
- Size: the photo should be no larger than 45 mm x 57 mm (1 3/4" x 2 1/4"). Your head in the photograph must be at least 30 mm (1 3/16") high.
- The photo must be original, not taken from an existing photo.
- Digitally produced photos are acceptable provided all other requirements are met.
- **Cut the image to fit the size requirements before sending it to us.**



RCMP GRC 5650 E V3 (2005/01/14) CAFC 1050

## LABEL INSTRUCTIONS:

- Print your name and your guarantor's name on the label below.
- Have your guarantor sign it and complete the Photo Guarantor section of your application.
- Cut and affix the label to the back of your photograph.
- Enclose the photograph with your application.

✂

|                                 |
|---------------------------------|
| _____<br>Name of applicant      |
| _____<br>Name of guarantor      |
| _____<br>Signature of guarantor |



For Administrative Use

## APPLICATION FOR A POSSESSION AND ACQUISITION LICENCE UNDER THE *FIREARMS ACT* (for individuals aged 18 and over)

**ATTENTION:**

Read the Information Sheet for explanations. Use an "X" to indicate your answers (where required). Print clearly in blue or black ink.

I would like to receive all information in:

English       French

**A LICENCE INFORMATION (see Information Sheet)**

|   |   |
|---|---|
| 1. a) I have:   |   |
| <input type="checkbox"/> never had a firearms licence   |   |
| <input type="checkbox"/> an expired firearms licence →  | Expired FAC, POL or PAL number  |
| 1. b) I request a different licence. I currently have a:  |   |
| <input type="checkbox"/> Firearm Acquisition Certificate (FAC) →  | Current FAC number  |
| <input type="checkbox"/> Possession Only Licence (POL) →  | Current POL number  |
| <input type="checkbox"/> Possession and Acquisition Licence (PAL) →   | Current PAL number  |
| <input type="checkbox"/> Minor's Licence →  | Current Minor's Licence number  |
| 2. a) If you are licensed, indicate the class of firearm(s) you now possess. Check all that apply.  |   |
| <input type="checkbox"/> Non-restricted <input type="checkbox"/> Restricted <input type="checkbox"/> Prohibited <input type="checkbox"/> I do not possess any firearms. |   |
| b) Indicate the class of firearm(s) you wish to acquire and possess in the next five (5) years. Check all that apply.   |   |
| <input type="checkbox"/> Non-restricted <input type="checkbox"/> Restricted <input type="checkbox"/> Prohibited (see Information Sheet)                                 |   |
| 3. Are you applying under the <i>Aboriginal Peoples of Canada Adaptations Regulations (Firearms)</i> ? (See Information Sheet)  | 4. If you are not a resident of Canada, in which province or territory will you be using your firearm(s) the most when in Canada? |
| <input type="checkbox"/> No <input type="checkbox"/> Yes    If <b>YES</b> , attach form CAFC 1016 ▶ <input type="checkbox"/>  |   |

**B PERSONAL INFORMATION (Please do not use initials or nicknames - see Information Sheet)**

|   |  |   |  |                        |   |
|---|--|---|--|------------------------|---|
| 5. a) Last name   |  | b) First name   |  | c) Middle name         |   |
| 6. a) Have you ever changed your name (including by marriage)?  |  | b) Previous last name   |  | c) Previous first name |   |
| <input type="checkbox"/> No <input type="checkbox"/> Yes    If <b>YES</b> , indicate previous name in boxes b) and c) (Attach a separate sheet, if necessary) |  |   |  |                        |   |
| 7. a) Date of birth (Y / M / D)   |  | b) Place of birth (City / Province / Territory / State)       |  | c) Country             |   |
| d) If you were born outside Canada, in what year were you admitted to Canada? ▶   |  | 8. Gender   |  | 9. Eye colour          | 10. Height  |
|   |  | <input type="checkbox"/> Male <input type="checkbox"/> Female |  |                        | <input type="checkbox"/> cm<br><input type="checkbox"/> ft / in |

**CONTACT INFORMATION**

|   |  |   |  |                                    |  |
|---|--|---|--|------------------------------------|--|
| 11. a) <b>Daytime</b> telephone number    Extension |  | b) <b>Evening</b> telephone number    Extension |  | 12. E-mail address (if applicable) |  |
| (    )    -   |  | (    )    -                                     |  |                                    |  |

**B PERSONAL INFORMATION (continued)**

**PROOF OF IDENTITY** You must provide the following information about one (1) piece of identification that was issued by a federal, provincial, territorial, regional or municipal government. The identification must have a number (see Information Sheet). Note that by providing this information you authorize the Canada Firearms Centre to verify the details with the issuing agency.

|                               |                       |                          |
|-------------------------------|-----------------------|--------------------------|
| 13. a) Type of identification | b) Issuing government | c) Identification number |
|-------------------------------|-----------------------|--------------------------|

**HOME ADDRESS** You must provide the physical location where you live (see Information Sheet).

|                                |                         |            |                |
|--------------------------------|-------------------------|------------|----------------|
| 14. a) Street or land location | b) Apt. / Unit          |            |                |
| c) City                        | d) Province / Territory | e) Country | f) Postal code |

**MAILING ADDRESS** Your mailing address is the address where you receive your mail.  Same as home address

|   |                         |            |                |
|---|-------------------------|------------|----------------|
| 15. a) Street / Rural route / PO Box number | b) Apt. / Unit          |            |                |
| c) City                                     | d) Province / Territory | e) Country | f) Postal code |

**C PERSONAL HISTORY (New Canadian Residents and Non-residents, see Information Sheet)**

If you answer **YES** to any of the questions in this section, you **MUST** provide details on a separate page. Add your name at the top of each page you attach. If details are not provided, your application cannot be processed.

A **YES** answer **does not mean** your application will be refused but it may lead to further examination.

If you have received a pardon for any offence listed in **box 16 a**, you are **NOT** required to disclose the offence.

|  |  |
|--|--|
| 16. a) During the past five (5) years, have you been charged, convicted or granted a discharge for an offence:<br>(i) under the <i>Criminal Code</i> or the <i>Youth Criminal Justice Act</i> where violence was used, threatened or attempted;<br>(ii) involving the misuse, possession or storage of a firearm; or<br>(iii) involving trafficking or importing drugs or controlled substances? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b) During the past five (5) years, have you been subject to a peace bond, protection order or an order under section 810 of the <i>Criminal Code</i> ?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c) During the past five (5) years, have you or any member of your household been prohibited from possessing any firearm?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d) During the past five (5) years, have you threatened or attempted suicide, or have you suffered from or been diagnosed or treated by a medical practitioner for: depression; alcohol, drug or substance abuse; behavioural problems; or emotional problems?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e) During the past five (5) years, do you know if you have been reported to the police or social services for violence, threatened or attempted violence, or other conflict in your home or elsewhere?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f) During the past two (2) years, have you experienced a divorce, a separation, a breakdown of a significant relationship, job loss or bankruptcy?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**D CONJUGAL STATUS (You must answer both questions 17 a) & b) or your licence application will be delayed)**

|   |  |  |
|---|--|--|
| 17 a) Do you currently have a spouse, common-law or other conjugal partner?   | <input type="checkbox"/> No <input type="checkbox"/> Yes | If yes, you <b>MUST</b> complete section E |
| b) Within the last two (2) years have you lived in a conjugal relationship other than with the person you may have referred to in question 17 a) above? | <input type="checkbox"/> No <input type="checkbox"/> Yes | If yes, you <b>MUST</b> complete section F |

**E INFORMATION ABOUT CURRENT CONJUGAL PARTNER (see Information Sheet)**

|   |                     |  |  |
|---|---------------------|--|--|
| <b>CURRENT CONJUGAL PARTNER</b>   |                     |  |  |
| Please provide information about your conjugal partner.   |                     |  |  |
| 18. a) Last name of <b>current</b> spouse, common-law or other conjugal partner   | b) First name       | c) Middle name   | d) Date of birth (Y / M / D)   |
| <b>If the signature of your current spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.</b> |                     |  |  |
| <b>IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.</b>  |                     |  |  |
| e) Signature of spouse, common-law or other conjugal partner  | f) Date (Y / M / D) | g) Telephone number and time when he/she may be contacted<br>(      )      -      (      ) | Extension <input type="checkbox"/> day<br><input type="checkbox"/> evening |

**F INFORMATION ABOUT FORMER CONJUGAL PARTNER****FORMER CONJUGAL PARTNER (See Information Sheet)**

Provide information about your **former** conjugal partners. This includes any person, other than the person named in Box 18, with whom you have lived in a conjugal relationship within the last **two (2) years**. If you need more space, list the information on a separate sheet of paper.

|  |                         |  |
|--|-------------------------|--|
| 19. a) Last name of former spouse, common-law or other conjugal partner  | b) First name           | c) Date of birth (Y / M / D)   |
| <input type="checkbox"/> I declare that I do not know the current address and/or telephone number of my former spouse, common-law or other conjugal partner.                   |                         |  |
| d) Street / Rural route / PO Box number  |                         | e) Apt. / Unit   |
| f) City  | g) Province / Territory |  |
| h) Country   |                         | i) Postal code   |
| <b>If the signature of your former spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.</b> |                         |  |
| <b>IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.</b>   |                         |  |
| j) Signature of former spouse, common-law partner or other conjugal partner  | k) Date (Y / M / D)     | l) Telephone number and time when he/she may be contacted<br>(      )      -      Extension <input type="checkbox"/> day<br><input type="checkbox"/> evening |

**G SAFETY TRAINING CERTIFICATION (see Information Sheet)**

|   |   |             |   |
|---|---|-------------|---|
| 20. a) Have you passed the Canadian Firearms Safety Course test?  |   |             |   |
| <input type="checkbox"/> No <input type="checkbox"/> Yes If <b>YES</b> ►  | Province                                | Date (Year) | <input type="checkbox"/> Proof attached |
| b) Have you passed the Canadian <b>Restricted</b> Firearms Safety Course test?  |   |             |   |
| <input type="checkbox"/> No <input type="checkbox"/> Yes If <b>YES</b> ►  | Province                                | Date (Year) | <input type="checkbox"/> Proof attached |
| c) Have you been certified by the Chief Firearms Officer as meeting the safety training requirements <b>OR</b> have you successfully completed a course approved by the Attorney General of Manitoba or Quebec prior to 1995? |   |             |   |
| <input type="checkbox"/> No <input type="checkbox"/> Yes If <b>YES</b> , specify ►  | <input type="checkbox"/> Proof attached |             |   |

**H REFERENCES**

A reference is anyone who has known you for at least three (3) years and is at least 18 years old. However, he or she **CANNOT BE** your current conjugal partner.

**FIRST REFERENCE**

|   |                         |  |
|---|-------------------------|--|
| 21. a) Reference's last name            | b) First name           | c) Telephone number and time when he/she may be contacted<br>(      )      -      Extension <input type="checkbox"/> day<br><input type="checkbox"/> evening |
| d) Street / Rural route / PO Box number |                         | e) Apt. / Unit   |
| f) City                                 | g) Province / Territory | h) Country   |
|   |                         | i) Postal code   |

**IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.**

I declare that I have known the applicant for three (3) years or more. I have read the information supplied by the applicant on this application. To the best of my knowledge and belief, I find it to be accurate and I know of no reason why, in the interest of safety of the applicant or any other person, the applicant should not be given a licence to possess and acquire firearms.

\_\_\_\_\_ | | | | | | | | | |  
Reference's signature Date (Y / M / D)

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**H REFERENCES (continued)**

**SECOND REFERENCE**

|   |                         |               |   |                |
|---|-------------------------|---------------|---|----------------|
| 22. a) Reference's last name            |                         | b) First name | c) Telephone number and time when he/she may be contacted<br>(    )    -    Extension <input type="checkbox"/> day <input type="checkbox"/> evening |                |
| d) Street / Rural route / PO Box number |                         |               |   | e) Apt. / Unit |
| f) City                                 | g) Province / Territory |               | h) Country  | i) Postal code |

**IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.**

I declare that I have known the applicant for three (3) years or more. I have read the information supplied by the applicant on this application. To the best of my knowledge and belief, I find it to be accurate and I know of no reason why, in the interest of safety of the applicant or any other person, the applicant should not be given a licence to possess and acquire firearms.

\_\_\_\_\_ Reference's signature      \_\_\_\_\_ Date (Y / M / D)

**I PHOTO GUARANTOR (see Information Sheet)**

A photo guarantor is a person who confirms that the photograph you supply accurately identifies you. Your photo guarantor must have known you for at least one (1) year and must be at least 18 years old. Your conjugal partner or one of your references may be your photo guarantor. Your photo guarantor must sign below and on the back of the photograph.

|                              |  |               |   |  |
|------------------------------|--|---------------|---|--|
| 23. a) Guarantor's last name |  | b) First name | c) Telephone number and time when he/she may be contacted<br>(    )    -    Extension <input type="checkbox"/> day <input type="checkbox"/> evening |  |
|------------------------------|--|---------------|---|--|

I declare that I have known the applicant for at least one (1) year. My name and signature on the back of the photograph confirm that the photograph accurately identifies the applicant.

\_\_\_\_\_ Guarantor's signature      \_\_\_\_\_ Date (Y / M / D)

**J FEES If you have previously held a firearms licence under the *Firearms Act*, excluding a Minors Possession licence or a revoked licence, do not enclose a fee.**

The fee for a licence depends on the class of firearm you possess or intend to acquire (see Information Sheet).

Check this box if you hunt or trap to sustain yourself or your family (see Information Sheet).

|  |  |                              |                                   |  |
|--|--|------------------------------|-----------------------------------|--|
| 24. Fee enclosed<br><b>\$      .00</b>             | 25. Indicate method of payment. <b>Do not send cash.</b> Make cheque or money order payable to <b>Receiver General for Canada.</b><br><input type="checkbox"/> Cheque <input type="checkbox"/> Certified cheque <input type="checkbox"/> Money order <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard |                              |                                   |  |
| If paying by credit card, complete this section. ▶ | 26. Credit card number<br>_____ - _____ - _____  | 27. Expiry date<br>____/____ | 28. Name appearing on credit card |  |

I authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 24.

\_\_\_\_\_ Cardholder's signature      \_\_\_\_\_ Date (Y / M / D)

**K APPLICANT DECLARATION**

**It is an offence under section 106 of the *Firearms Act* to knowingly make a false or misleading statement, either orally or in writing, or to knowingly fail to disclose relevant information, for the purpose of obtaining a licence.**

**I declare that the information provided on this form and on any attachment(s) is true and correct to the best of my knowledge and that the photograph enclosed is of me.**

\_\_\_\_\_ Applicant's signature      \_\_\_\_\_ Date (Y / M / D)

Information contained in this application is obtained under the authority of the *Firearms Act*. The information will be used to determine eligibility and to administer and enforce the firearms legislation. In addition to the provisions outlined in the *Firearms Act*, individual rights regarding personal information are governed by the applicable federal, provincial or territorial legislation relating to access to information and privacy.