



SOUTH AFRICAN POLICE SERVICE

TRANSFER OF FIREARM OWNERSHIP

Section 125(2)(a)(iii) of the Firearms Control Act, 2000(Act No 60 of 2000)

OFFICIAL DATE STAMP
DATE RECEIVED

A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE REQUEST IS CAPTURED										
¹ Transfer reference No										

B. FOR OFFICIAL USE BY POLICE STATION WHERE THE REQUEST IS RECEIVED										
1	Province									
2	Area									
3	Police station									
4	Component code									
5	SAPS 13 register reference number									
6	General firearm transactions register ref no	NO	YEAR							

C. PARTICULARS OF CURRENT OWNER										
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NATURAL PERSON'S DETAILS

2	SA ID	Passport								
3	Identity number of natural person									
4	Passport number of natural person									
5	Surname								⁶ Initials	
7	Residential address									
									⁸ Postal Code	
9	Postal address									
									¹⁰ Postal Code	
11	Telephone number		^{11.1} Home ()		^{11.2} Work ()					
11.3	Cellphone number				¹² Fax ()					
13	E-mail address									

JURISTIC PERSON'S DETAILS

OTHER BODIES

16	Registered company name									
17	Trading name									

18	FAR number																	
19	Postal address																	
														20 Postal Code				
21	Business address																	
														22 Postal Code				
23	Business telephone number	23.1 Work	()	23.2 Fax	()									
24	E-mail address																	

RESPONSIBLE PERSON'S DETAILS

26	Responsible person (full names and surname)																					
27	Type of identification (Indicate with an X)	SA ID					Passport number															
28	Identity number of responsible person						-										-					
29	Passport number of responsible person																					
30	Cellphone number																					
31	Physical address																					
														32 Postal Code								
33	Postal address																					
														34 Postal Code								

35	Reason(s) for transfer of firearm	<p>.....</p> <p>.....</p> <p>.....</p>														
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D. DETAILS OF FIREARM(S) TO BE TRANSFERRED

DETAILS OF FIREARM(S)

	(1)	(2)	(3)	(4)	
2	Type				
3	Calibre				
4	Make				
5	Model				

Firearm component type:

6	Barrel serial number				
6.1	Make				
7	Frame serial number				
7.1	Make				
8	Receiver serial number				
8.1	Make				

E. PARTICULARS OF DEALER/GUNSMITH TO WHOM THE FIREARM IS TRANSFERRED

1	Registered company name												
2	Trading as name												
3	FAR number												
4	Postal address												
										5 Postal Code			
6	Business address												
										7 Postal Code			
8	Business telephone number	8.1 Work	()	8.2 Fax	()				
9	E-mail address												

DECLARATION BY PERSON WHO IS THE LAWFUL OWNER OF THE FIREARM(S)

I hereby declare that the above firearm(s) is/are legally in my possession and that I intend to sell or supply it once the necessary authorization(s) has/have been obtained and that the details of the firearm(s) are correct and accurate.

I am aware that it is an offence in terms of the Firearms Control Act, 2000 (Act No 60 of 2000), to make a false statement in this transfer of firearm ownership form.

F. SIGNATURE OF CURRENT OWNER (Sign only if applicable)

1	SIGNATURE OF CURRENT OWNER	
2		3 Date
	Name of current owner in block letters	
4 Signature of current owner	5 Place
6	SIGNATURE OF DEALER/GUNSMITH	
7		8 Date
	Name of dealer/gunsmith in block letters	
9 Signature of dealer/gunsmith	10 Place

G. (This section must only be completed if the current owner cannot read or write.)

1		2 Fingerprint designation	3 Date
	Right index fingerprint of current owner		
6	PARTICULARS OF POLICE OFFICIAL DEALING WITH REQUEST		
6.1		6.2	
	Name of police official in block letters		Persal number of police official
6.3		6.4	
	Rank of police official in block letters		Signature of police official

7 PARTICULARS OF WITNESS

7.1

Name of witness in block letters

7.2

Persal number of witness

7.3

Rank of witness in block letters

7.4

Signature of witness

H. PARTICULARS OF INTERPRETER
 (This section must be completed only if the current owner cannot read or write or does not understand the content of this form.)

1	Name and surname of interpreter																
2	Identity/Passport number of interpreter	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Residential address																
												4 Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Postal address																
												6 Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	Telephone number	7.1 Home	(<input type="text"/>)	7.2 Work	(<input type="text"/>)								
8	Cellphone number						9 Fax	(<input type="text"/>)							
10	E-mail address																
11	Interpreted from (language)	<input type="text"/>	to	<input type="text"/>													

12 **Date**

13
Signature of interpreter

14 **Place**

15
Rank of police official in block letters (if applicable)

16
Persal number of police official (if applicable)

I. PARTICULARS OF POLICE OFFICIAL

1
Name of police official in block letters

2 **Date**

3
Rank of police official in block letters

4 **Place**

5
Signature of police official

6
Persal number of police official