

SOUTH AFRICAN POLICE SERVICE

APPLICATION FOR MULTIPLE IMPORT OR EXPORT PERMIT/ PERMANENT IMPORT OR EXPORT PERMIT/TEMPORARY IMPORT OR **EXPORT PERMIT/IN-TRANSIT PERMIT FOR PERSONAL USE**

(Individuals and companies) Section 73(2), 74, 76, 77, 78, 80, 81 and 82 of the Firearms Control Act, 2000 (Act No 60 of 2000)

OFFICIAL DATE STAMP FOR OFFICIAL USE BY THE POLICE STATION Α. WHERE THE APPLICATION IS CAPTURED ¹ Application reference No DATE RECEIVED

B. FOR OFFICIAL USE B	Y POLICE STAT	ION WHERE APPLICATION IS F	RECEIVED
Province			
Area			
Police station			
Component code			
Firearm applications register reference number	SAPS 86	NO	YEAR

C.								FOF		USE B	Y TH	IE DI	ECIDII	NG	OFF	CER	2					
¹ Out	sta	nding	g/Add	lition	al infe	ormat	tion r	equir	ed													
											••••••											
							-		² Persal nun	nber					-			-			³ Date	
			4 5	Signa	ture o	f polic	ce offi	cial								⁵ Nai	me in	block	c lette	rs		
⁶ Арр	lica	tion	for a	pern	nit ap	prove	ed (Ind	licate v	with an X)													
							-		⁷ Persal nun	nber					-			-			⁸ Date	
						•						•									•	
			9 ç	Signa	ture o	f deci	ding	officer		¹⁰ Office	er cod	le	•		11	Nar	ne in	block	lette	ſS		
	olic	ation	for a	a peri	mit re	fused	l (Indio	cate wi	th an X)		¹³ F	Reaso	on(s) fo	or re	fusa							
										-												
							-		¹⁴ Persal nu	mber					-			-			¹⁵ Date	
												1										
			16	Signa	ature (of dec	iding	office	r	¹⁷ Office	er cod	le	<u> </u>		1	[®] Na	me in	block	c lette	rs		I

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	D.			TYP	E OF	PER	RMIT	(Indic	ate wit	h an X	()									
	¹ Multiple import or export permit	² Im	iport perm	it			port rmit			4	In-tra perm				5	Tem or ex	porar <u>y</u> kport j	y impo permit	ort	
	E.			PAF	RTIC	ULAF	rs of	F AP	PLIC	:AN1	Г									
1	NATURAL PERSON'S DETA	ILS																		
2	Type of identification (Indicat	e with an X)																		
2.1	SA ID Pas	ssport]																
3	Identity number of natural per	son									-					-			-	
4	Passport number of natural p	erson																		
5	Surname													⁶	nitials	\$				
7	Full names											-					-			
8	Date of birth		-		-			9	Age					10 (Gende	ər	Ma	ale	Fer	nale
11	Residential address																			
													12	Post	al Coo	de				
13	Postal address												_							
									_	_	_	_	14	Post	al Co	de				
15	Trade or profession	L			1		16	lf se	elf-em	ploye	ed, sp	ecify			1					
17	Name of employer/company																			
18	Business address												40							
20		20.4						20	2			-	19	Post	alCo	de				
20	Telephone number	^{20.1} Horr	ne ()				20.	2 W			()							
20.5	Cellphone number	_						21	Fa	х		()							
	E-mail address																			
23	Marital status (Indicate with an	X)																		
24	Single	Marrie	ed			Divo	orced					Widov	v				Wid	ower		
	Other (specify)																			
25	PARTICULARS OF APPLICA	NT'S SPO	USE/PAR	TNER	l (If app	olicable	;)													
25.1	Type of identification (Indicat	e with an X)		_																
25.1.1	SA ID Pas	ssport																		
25.2	Identity number of spouse/pa	rtner									-					-			-	
25.3	Passport number of spouse/p	artner																		
25.4	Full Name and Surname																			
26	JURISTIC PERSON'S DETA	ILS																		
27	Registered company name																			
28	Trading as name																			
29	FAR number																			
30	Postal address																			

																							SAP	-
																	³¹ Po	ostal	Code	Э				
32	Business address																							
																	³³ Po	ostal	Code	e				
34	Business telephone r	numb	ber	34.1	^I Work	¢	()				3	^{34.2} F	ax	()								
35	E-mail address																							
36	RESPONSIBLE PER	RSON	I'S DI	ΕΤΑ	ILS																			
37	Responsible person ((full r	ame	and	surna	me)																		
38	Type of identification	(Indic	ate wi	th an	ıX)					SA	A citize	en			No	on-SA	citize	ı wit	h per	mane	ent res	idenc	e*	
39	Identity number of rea	spon	sible	pers	son										-					-			-	
40	Passport number of r	respo	onsible	e pe	rson																			
41	Cellphone number																-							-
42	Physical address																							
																	43	Pos	stal Co	ode				
44	Postal address																					•	•	
																	45	Pos	stal C	ode				
46																								
47	Type of competency	certi	ficate	(If ap	pplicab	le)	1			1	40								1			1	1	
	Date of issue				-			-			48	Expir	y date	9					-			-		
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4 5	Surname Full names Identity number of na Passport number of r	atural	perso	on											-			³	nitials	-			-	
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* In case of a non-SA citizen proof of permanent residence must be submitted.

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21	Business	address																				•			
																		22	Posta	l Cod	le				
23	Business	telephone	e numbe	er	23.1	Work	•									23.2	Fax								
24	E-mail ad	dress																							
25	RESPON	SIBLE PI	ERSON'	'S DI	ETAIL	3																			
26	Responsi	ble perso	n (full na	ame	and su	rnam	ne)																		
27	Type of ic	lentificatio	D N (Indica	ate wi	th an X)	1					_	SA	ID	_					Pa	sspor	t num	ber	_		_
28	Identity n	umber of	respons	ible	person											-					-			-	
29	Passport	number o	of respor	nsible	e perso	n																			
30	Cellphone	e number																							
31	Physical	address																							_
																		32	Posta	al Coc	le				
33	Postal ad	dress																					_		
																		34	Posta	al Coo	de				
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	G.							IN	IPOF		ND/C	DR E	XPOF		ETAI	LS									
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2	Country o	f destinat	ion																						
3	Port of er	itry																							
4	Port of ex	it																							
5	Reason fo	or permit																							
6																									
•	In case o	f a perma	nent imp	oort/e	export	perm	it, s	ubmi	t the	date o	on wh	ich th	e imp	ort/ex	port v	vill tak	e plac	ce							
7	Date on v	which the	import/e	xpor	t will ta	ike pl	ace							Da	ate					-			-	Π	
8	In case o	f a multipl	e impor	tore	avnort i	ormi	it/to	mnor	anv in	nort	orex	port n	ormit/	in_tra	neit n	armit	eubm	uit the	follo	vina		7			
	III case o	a mulupi	e impon		sport		li/le	прог		ιροπ		port p	emin	in-uai	isit p	errint,	Subm		101101	ving					
9	Period for	which pe	ermit is r	equi	red																				
9.1	FROM	Date				-			-			то	9.2	Da	ate					-			-		
	Н.		TR	ANS	POR	rer'	SC)ETA	AILS	(Comj	olete c	nly in	the cas	e of ar	n in-tra	nsit pe	ermit fo	or busii	ness p	urpose	es)				
1	FAR num	ber								1			Ī												
2	Transport		e and su	Irnan	ne																				
3	Transport				-																				
4	Method o		-	<u> </u>																					
5	Transport (name an	er's respo	onsible p	perso	on																				
6	Type of ic			ate wi	th an X					SA	itizer	ĺ				Non	I-SA c	citizer	with	perm	anent	: resid	ence*		
7	Identity n											Γ	Γ		-	-				2.2111	_			_	
8	-				000000								1			_					_				
	Cellphone	number						<u> </u>																	

* In case of a non-SA citizen proof of permanent residence must be submitted.

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9	Validity of the transporter's per	mit	FROM	Date			-		-		
			то	Date			-		-		
10	Transport route										

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DETAILS OF FIREARMS

1.1	Туре	^{1.2} Action	^{1.3} Calibre	^{1.4} Model	^{1.5} Make	^{1.6} Frame or receiver serial number	^{1.7} Barrel serial number

2 DETAILS OF AMMUNITION

2.1

2.1.1	Туре	2.1.2	Quantity
	туре		Quantity

2.2.1	Туре	2.2.2 Quantity

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and applicant in block letters and applicant and applicant <t< td=""><td>ly if applicable)</td></t<>	ly if applicable)
and applicant in block letters and applicant and applicant <t< td=""><td></td></t<>	
Anticulars of Police official in block letters	
Image: Contract of applicant (This section must be completed only if the applicant Image: Contract of applicant Image: Contract of a	e
articulars of witness 6.2 articulars of witness 6.4 Signation 7.2 7.4	
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ne of witness in block letters 7.2 Persa 7.4	
ne of witness in block letters Persa 7.4	
7.4	
	I number of witness
ik of witness in block letters Signa	
	ture of witness
PARTICULARS OF INTERPR (This section must be completed <u>only</u> if the applicant cannot read or write of	
ame and surname of interpreter	,
entity/Passport number of interpreter	
esidential address	

SAPS 520

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5	Postal address															
						_				⁶ Po	stal Co	de				
7	Telephone number	^{7.1} Home	()			7.2	Work	(()						
В	Cellphone number					9	Fax		()						
10	E-mail address															
11	Interpreted from (language)						to									
					12	Da	to					<u> </u>				<u> </u>
13	Oliver the official second second				14	Pla	ice									
	Signature of interpreter		-			r						-		1		
15	Deals of police official in block las				16		ļļ					-	(:6	l'a a b l		
	Rank of police official in block le	tters (if applica	DIE)				ľ	Persa	I numi	per of p	olice of	licial	(ir app		ə)	
	М.	P	ARENTA		ENT IN C	ASE (OF A M	NINO	R							
1	Reco	mmended			E				Not re	ecomm	ended					
_				_												
2	Name and surname of parent/g	guardian										_		-		-
3	Identity/Passport number of pa	rent/guardian														
4	Comments of parent/guardian															
					ŧ	D	ta									
						Da	le				-			-		<u> </u>
6					7											
	Signature of parent/guardian					Pla	ice									

Nome and surname of nominae/outbarize														
Name and surname of nominee/authorize											1	1		
Identity/Passport humber of hominee/aut	nonzeu person													
				3	Date					-			-	
				in the		_								
				5	Place									
Signature of nominee/authorized person														
	*** NOTIFICATI													
The Registrar must be infor	med of all changes	of addres	ss/ciro	cums	tances v	vithin 3	0 day	s of su	ich cł	hange	es oc	currir	ng	
0. FOR OFFICIAL USE	BY THE DESIGN	ATED F	IREA	RM	S OFFI	CER/S	STAT		COM	MISS	SION	IER		
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Recommended	RECOMMENDATI	ION REG	SARD	ING	THE API	LICA		recom		dod				Т
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Motivation regarding the application														
				4	Date					-				
Name of Designated Firearms Officer/Stati	on Commissioner in	n block le	ttters	4	Date					-				
				4 [Date					-				
				6						-				
Rank of Designated Firearms Officer/Static	on Commissioner in	block let		6	Place					-				
Name of Designated Firearms Officer/Stati Rank of Designated Firearms Officer/Static	on Commissioner in	block let		6 [8 [of De	signat	ed Fi	- Tearm	- ns Of			
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