**SURRENDER OF ACT FIREARMS LICENCE** ACT Firearms Act 1996

**ACT Firearms Registry**

**Use Only**

**Licence Number:**

**APPLICANT DETAILS**

Firearms licence number

Surname

Given Name(s)

Date of Birth

dd mm yyyy

**I wish to surrender my ACT Firearms Licence for the following reason:**

**Moved Interstate**

Previous ACT Address

New Address

New Licence Details

What state is this licence issue in?

ACT

NSW VIC TAS QLD NT SA WA

**Firearm(s) Sold/Disposed**

Dealer Return Number

If more than one firearm has been sold or disposed of, enter the dealer return numbers in the box below.

Australian Capital Territory

Firearms Registry

**ADULT FIREARMS LICENCE APPLICATION**

You are required to provide 100 points of identity with your application for a

new licence under this Act.

**1. APPLICANT DETAILS *Please Use***

***BLOCK LETTERS in dark pen only.***

To be completed by The applicant for this Licence.

Family Name

**Licence No Longer Required**

**Other Reason (please provide details below)**

Signature of Licence Holder dd mm yyyy

AFP 3017 (1/09)

AF2009-19 Approved by Commander Bruce Hill, ACT Firearms Registrar on 7 September 2009 under s271 of the *ACT Firearms Act 1996*