



NORTHERN TERRITORY POLICE

Section 16 – *Firearms Act*

APPLICATION FOR A DEALER'S LICENCE

Note: A Dealer's Licence will not be issued until premises is inspected and approval given on each new or reissue of licence application.

POLICE USE ONLY	
Firearm Licence No:	
Receipt No:	
Fee Charged: \$.....	
PROMIS Insp No:.....	

Name of Dealership:		
Business Mobile:	Business Phone Number:	Business email:
Business Address of Dealership (Number, Street, Suburb):		Post Code:
Postal Address of Dealership (PO Box Number, Town/City):		Post Code:

Principle Nominees Surname:	Given Name:	Middle Name(s):
Date of Birth: / /	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Home Phone Number:..... Mobile Phone Number:..... Email:.....
Place of Birth:		

Persons employed under the licence:

ADDITIONAL NOMINEES FULL NAME	DATE OF BIRTH	DEALER NOMINEES LICENCE NUMBER

Please tick appropriate box

I hereby apply for a licence to deal in / store firearms of Categories: A B C D H

1. The premises to be used is: rented leased my own property other (describe)

If not your own property, who owns the premises?.....

a. The premises is a permanent building: Yes No

b. I am / will be in charge of the premises upon the grant of the licence: Yes No

c. For the safe keeping of firearms, the premises have the following security arrangements (describe type and location):.....

.....
.....

2. I have made a previous application relating to this Act: Yes No

3. Have you ever been refused, or had, a licence, permit or registration revoked relating to this act: Yes No

If yes, details,

.....

4. Are there any silent partners or close associates involved in the dealership not listed as a nominee? Yes No...

If Yes list their names / association details:.....

.....

5. What are your hours of business?

.....

.....

COMPLETE FURTHER INFORMATION OVER PAGE

6. Are all firearms and ammunition stored at this location? Yes No

If no please supply details of location:
.....

DEALER APPLICATION

DECLARATION

Privacy Disclaimer Northern Territory Police Fire and Emergency Services (NTPFES) is collecting information on this form to ensure compliance with legislation and to ensure the Commissioner of Police can satisfy him/herself of a number of matters related to the issuing of firearms license's, permits and registration. This collection is authorised or required by the NT *Firearms Act* and *Regulations*. Through national agreements the NTPFES will provide some or all of this information to other agencies with a direct interest in firearm permits, licensing, and registration. Failure to provide this information in full or in part may result in your application not being processed or being refused.

You can access your personal information provided on this form. If you have any queries or wish to access this information please contact NTPFES by phoning 08 8999 5511 (NT Government Switch).

Note: All persons employed under the licence (including nominee(s)) require a Dealer Nominees licence – A separate Dealer Nominees application (PF463 - Application for – Employees Licence / Dealer Nominees Licence *) is required.

I solemnly and sincerely declare that the above particulars contained in this application are true and correct. I make this application under the *Firearms Act* and acknowledge to make a false statement in an application is an offence under Section 89(1) of that Act.

Signature of Principle Nominee:..... Date: / /

PRINTED NAME IN FULL

Declared at (Police Station):

PENALTY: 100 PENALTY UNITS OR IMPRISONMENT FOR 2 YEARS FOR FALSE OR MISLEADING STATEMENT

RECEIVING MEMBER MUST COMPLETE BOX

RECEIVING MEMBER TO COMPLETE

Signature of member receiving application:

.....

Member (printed):

Position / Rank / Reg. No.:

Date Received:

...../...../.....

CHECK ALL QUESTIONS ARE ANSWERED FULLY AND THE FORM IS SIGNED AND DATED CLEARLY

SCAN and FORWARD TO THE FIREARMS POLICY AND RECORDS UNIT (FPRU),

PETER MCAULAY CENTRE, DARWIN

Email: firearmsregistry@pfes.nt.gov.au

FPRU USE ONLY

APPROVED NOT APPROVED

Reason Category: Reason Code:

Condition Codes:

Signature: Position/Rank: Date: / /

SCAN APPLICATION AND SAVE TO LICENCE WHEN ISSUED/REFUSED