

Application for Firearms Corporate / Museum Licence

Northern Territory Firearms Act 1997

Read the instructions attached before completing the form.

To be lodged in person at a Northern Territory (NT) police station

Police use only
NT Firearms licence no:
Fee:
Receipt No:
Date:
SerPro no:

Section 1: Business type (Please tick ☑ appropriate boxes)

Type of business				
☐ Corporate ☐ Museum ☐		Paintball operator	Security firm	
Section 2: Business details	*see note			
Business details				
Business name:		Corporate firearm licence r	no:	
Business phone number:		Business mobile number:		
Business email:				
Business address:				
Postal address:				
ABN:		ACN:		
Security firm licence numbe	r:			
Note: Security firm licence number is requ	uired for security firms only.			

Section 3: Business representative

Section 4: Business re	epresentative licence	det	ails			
Licence details						
Driver licence number: NT employee firearms licence						
State:	Expiry date: Licence no: Expiry date:					
Section 5: Close assoc	ciates *see note					
Close associate						
Family name:	Gi	ven	name/s:		Middle name	e/s:
Residential address:						
Date of Birth:		Nat	ture of association:			
Note: Close associates are only red	quired for Paintball operators.					
Section 6: Firearms ca	tegory (Please tick ☑ appro	priate	boxes)			
Category of firearm re	quired					
ΠA	□В		С		D	□Н
Section 7: Genuine re	ason *see note					
Genuine reason						
☐ Animal protection ☐ Occupational requirements ☐ Business or employment ☐ Paintball operator or employee ☐ Instruction in firearms use and safety ☐ Primary production ☐ Museum display ☐ Vertebrate pest animal control						
Note: Refer to the information she		nuine r	reason is relevant to your bu	usiness.		
Section 8: Reason for	licence *see note					
Reason for licence						
Brief description only						

Note: If you require a licence for category C, D and H firearms, you must provide a genuine need i.e. necessary or essential.

Section 9: Firearms safety and training course

Training provider / instructor delivering the Firearm training and safety course
Name of training provider/instructor:

Section 10: Storage and safekeeping of firearms (Please tick ☑ appropriate box)

Sto	orage details
	Self-storage - Category A and B (Attach PF491 - Self declaration for storage / safekeeping of firearms (previously inspected and no change))
	Self-storage - Category A, B, C, D and H (Attach PF482 - Permission to inspect premises (First time applicants / existing C, D, H holders / new safe / new location))
	Permission to store - Category A, B, C, D and H (Attach PF492 - Permission to store firearms notice)

Section 11: Particulars of employees *see note

ticulars of employees using or intending to use or have access to company/museum firearms			
Name (Given name/s, Family name)	Date of birth	Employee licence no	Address (where currently residing)

Note: Attach additional list of Employees on a separate page (if required).

Section 12: Particulars of firearms *see note

ategory	Make/Brand	Model	Serial number	Action type	Calibre (e.g. 300 Win Mag)	Capacity

Note: When reapplying for a current Corporate / Museum licence, list existing firearms. Attach additional list of firearms on a separate page (if required).

Section 13: Privacy disclaimer and declaration

Privacy disclaimer

The Northern Territory Police (NTP) is collecting information from your application to ensure compliance with legislation. This collection is authorised and required by the NT *Firearms Act 1997* and NT *Firearms Regulations 1997*.

Through national agreements the NTP will provide this information to other agencies. Failure to provide this information in full or in part may result in refusal of your application.

You can access your personal information provided on this form. If you have any queries or wish to access this information, please contact NTP by phoning 08 8922 3543.

Declaration	
I solemnly and sincerely declare that the above particulars contained in this application are true and correct. I make this application under the NT <i>Firearms Act 1997</i> and acknowledge that a false statement in an application is an offence under Section 89 of that Act.	
Applicant signature: Date:	
Applicant full name:	

Penalty: 100 penalty units or imprisonment for 2 years for false or misleading statements

Firearms ownership is not a right, it's a responsibility

Police use only					
Receiving member to complete					
Member name (Print):	Signature of member receiving application: Date received:				
Position/Rank:	Police station received at:				
Reg. no:					
Checklist					
application completed and signed					
a copy of your business registration					
signed letter outlining the reason for ap	plying for a firear	ms corporate licence			
firearm storage form and photos (if app	licable)				
copy of your Public Liability Insurance					
current contracts (proof of operations)					
a copy of CASA aerial work certificate (if applicable)					
Primary Producers					
copy of your Primary Producers Conce	ssion				
Safari guides / tour operators					
a map or maps showing safari/tour loca	ality in relation to t	he nearest major towns or com	nmunities		
detailing the specific concessions (safar locations	i areas) you opera	te in and include any permaner	nt campsite		
if on private property - a currently date	d contractual agre	ement including the dates it's i	n force for		
if on Aboriginal land – a legally binding business, Land Trust or Council (NLC/C	_		_		
if using another safari operators concessincluding a commencement and expiry	• •	ne agreement with that compa	ny/operator		
tourist vehicle registration for client tra	nsport				
current tour operators licence/s (if app	licable)				
returns/receipts to demonstrate that yo	ou are actively trad	ding as a safari/tour operator (r	eissue of a licence)		
current vessel registration if conducting	g fishing tours (if a	pplicable)			

Fishing/pearling
current vessel registration
returns/receipts to demonstrate that you are actively trading
☐ fishing licence
Pet meat
pet meat or culling/shooting contracts
☐ Application entered on SaFER

Note: Ensure application is uploaded to the applicant's SaFER document folder