



Application for Weapons Control Act Approval - Individual

Northern Territory Weapons Control Act 2001

**TO BE LODGED IN PERSON AT A NORTHERN TERRITORY (NT)
POLICE STATION.**

(Please tick appropriate box)

- Reason: Employment (includes as instructor)
- Personal

POLICE USE ONLY

Weapons Act Approval No:

Fee:

Receipt No:

Date:

SerPro ID:

Section 1: Articles sought on approval (*see note) Please tick appropriate boxes

Article types

- Prohibited Weapons Body Armour Oleoresin Capsicum Spray or similar*

*Note: An application for Oleoresin Capsicum Spray or similar weapon requires additional supporting documentation.

Section 2: Personal details

Applicant details

Family name		First given name/s		Middle name/s	
Date of birth		Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Unspecified
Place of birth	Town	State	Country		
Home phone number		Work phone number		Mobile phone number	
Email					
Current residential address:					Post Code
Current postal address:					Post Code
Drivers Licence No.:		Weapons Act approval No.:			
State:		Expiry date:		Expiry date:	

Section 3: Business/corporate details (*for employment application)

Business/corporate details

Business name:	Weapons Act approval no.: (if applicable)
Function of business:	
Applicants role:	
Business phone no.:	Business mobile no.:
Business email:	ABN/ACN no.:
Business physical address (Not PO Box):	Post Code
Business postal address:	Post Code

Section 4: Reason for application

Reason approval is sought (select all that apply):			
<input type="checkbox"/>	Advertise for sale	<input type="checkbox"/>	Purchase
<input type="checkbox"/>	Manufacture	<input type="checkbox"/>	Display
<input type="checkbox"/>	Sell	<input type="checkbox"/>	Possess
<input type="checkbox"/>	Bring into the Territory	<input type="checkbox"/>	Use
<input type="checkbox"/>	Cause to be brought or sent into the Territory	<input type="checkbox"/>	Carry
<input type="checkbox"/>	Provision of training and instruction		

Section 5: Employment application

Employment – To be completed by employer or employer’s representative	
I, _____ (Employer name) Of, _____ (Address)	
Corporate weapons approval no.: _____	
require _____ (Employee name)	
to have in their possession whilst employed by my company as a, _____ (Employee occupation)	
for the following items:	
<input type="checkbox"/> Prohibited Weapon: Please provide details of weapon/s (*refer note)	
<input type="checkbox"/> Body Armour: Please provide details of body (*refer note)	
<input type="checkbox"/> Oleoresin Capsicum Spray: (**refer note)	
All weapons/body armour used by this person (as detailed above) will be owned by the company and will only be used in conjunction with their employment. An Employee approval will only be issued for the same reasons (above) that a Corporate approval was issued for.	

Employer declaration	
I solemnly and sincerely declare that the above particulars contained in this application are true and correct. I make this application under the <i>Weapons Control Act 2001</i> and acknowledge to make a false statement in an application is an offence under Section 13 of that Act.	Declared at (Place):
Employer signature: _____ Date: _____	
Employer full name: _____	

* Note – All employee applications must have accompanying documentation on a company letterhead detailing the duties of the applicant and the requirements for the prohibited weapon or body armour approval.

**Note – Applications for Oleoresin Capsicum Spray must have accompanying documentation on company letterhead detailing the duties of the applicant and which takeaway liquor outlet/s the applicant will be performing duties at.

Section 6: Personal application

Personal

Detail in a written submission, to the satisfaction of the Commissioner, referencing the reason(s) selected above, why you need the Prohibited Weapon/s or Body Armour. The written submission must be attached to this application.

List below the types and amounts of Prohibited Weapons and/or Body Armour you seek to possess (refer to Schedule 2 of the *Weapons Control Regulations 2001*):

Section 7: Storage details

Storage details *Personal applications only, not relevant to employment application

Prohibited Weapons and/or Body Armour
Describe storage arrangements:

*Prohibited Weapons and/or Body Armour cannot be personally owned under an approval issued for employment purposes.

Section 8: Training course (*see note)

Training details – Applicants for Oleoresin Capsicum Spray only

The following approved training program has been completed (must have been completed within 3 months prior application being submitted):

The following first aid course has been completed and is current:

Attach copy of course certificates

*Training course is required for an application under 132A of the *Weapons Control Act 2001*.

Section 9: Privacy disclaimer

Privacy disclaimer

Privacy disclaimer: Northern Territory Police Force (NTPF) is collecting information from your application to ensure compliance with legislation and to support related processes. This collection is authorised and required by the *NT Weapons Control Act 2001* and *Weapons Control Regulations 2001*. Through national agreements the NTPF will provide some or all of this information to other agencies with an interest in weapons approvals. 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 NTPF by phoning 08 8999 5511 (NT Government switch).

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 Weapons Control Act 2001* and acknowledge to make a false statement in an application is an offence under Section 13 of that Act.

Declared at (Place)

Signature of applicant:

Date:

Printed name:

PENALTY: 100 PENALTY UNITS OR IMPRISONMENT FOR 2 YEARS FOR FALSE OR MISLEADING STATEMENTS
– Weapons ownership is not a right, it's a responsibility –

Application checklist			
<input type="checkbox"/>	Photograph of applicant taken and uploaded	<input type="checkbox"/>	Training certificate attached (OC Spray – completed within 3 months of application being submitted)
<input type="checkbox"/>	Detailed reason for application provided and attached	<input type="checkbox"/>	First Aid Certificate attached (OC Spray)
<input type="checkbox"/>	Justification for each reason for particular weapon/s provided (Section 4)	<input type="checkbox"/>	Copy of Crowd Controller Licence attached (OC Spray)
<input type="checkbox"/>	Storage details provided (if applicable)	<input type="checkbox"/>	Letter from employer provided (if applicable)
<input type="checkbox"/>	Application updated on SaFER: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	Employer declaration signed (if applicable)
	if no, reason:	<input type="checkbox"/>	If application is for an “Instructor” a Cert. IV in Training and Assessment (or similar qualification) is attached

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.:		

Character / Conviction			
<input type="checkbox"/> SerPro ID check completed (by member receiving application)		<input type="checkbox"/> Unknown – new SerPro ID:	
		<input type="checkbox"/> Known – SerPro ID’s list all:	
Criminal/Traffic history:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (old/minor/not criminal)
			<input type="checkbox"/> Relevant, attach printout of details
Involvements:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (old/minor/not criminal)
			<input type="checkbox"/> Relevant, attach printout of details
Alerts/Warrants/DVO’S:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (old/minor/not criminal)
			<input type="checkbox"/> Relevant, attach printout of details
<input type="checkbox"/> IJIS check completed (by member receiving application)		<input type="checkbox"/> Unknown	
		<input type="checkbox"/> Known – IJIS ID:	
Criminal/Traffic history:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (old/minor/not criminal)
			<input type="checkbox"/> Relevant, attach printout of details
Domestic Violence Orders Personal Violence Orders Restraining Orders	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (more than 6 years old)
			<input type="checkbox"/> Relevant (less than 6 years old). Attach printout of details
Other history/Orders	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	<input type="checkbox"/> Not relevant (old/minor/not criminal)
			<input type="checkbox"/> Relevant, attach printout of details
<input type="checkbox"/> AFIN/NFLRS checks for interstate records completed (for all applications)		<input type="checkbox"/> Current <input type="checkbox"/> Expired <input type="checkbox"/> Not relevant	
		<input type="checkbox"/> Relevant, attach printout of details	
<input type="checkbox"/> MDEA/NPRS/NCIS/IR checks completed		<input type="checkbox"/> Known <input type="checkbox"/> Unknown <input type="checkbox"/> Not relevant	
		<input type="checkbox"/> Relevant, attach printout of details	

COMPLETED APPLICATION MUST BE ADDED TO SaFER AND APPLICATION UPLOADED TO SaFER DOCUMENTS.

firearmsregistry@pfes.nt.gov.au - RETAIN THE ORIGINAL FORM AT RECEIVING STATION

For more information visit: <https://pfes.nt.gov.au/police/firearmsweapons>

Instructions and Information for Northern Territory (NT) *Weapons Control Act 2001*

Individual approval application

General instructions:

Complete this form if you are applying for a weapons individual approval.

100 points of identification must be provided when you lodge the application.

Application must be lodged in person at a NT Police Station.

All *NT Weapons Control Act 2001* applications within the Greater Darwin and Palmerston area (Darwin, Casuarina, Palmerston, and rural areas) are to be lodged at the Palmerston Police Station during business hours (8am–6pm Monday to Friday, excluding public holidays). All applications outside the greater Darwin area can be lodged at any NT Police Station. Please ensure you allow enough time for processing, payment and photos to be taken prior to office closure (approximately 30 mins).

There is no renewal system in the NT - each and every application is a fresh application under the *Weapons Control Act 2001* (The Act), and all supporting documentation must be provided on each occasion.

Applications are to be submitted by an individual that has an established reason and demonstrates the need for prohibited weapons or body armour. For every application for employment purposes the Employer or Employer Representative is fill out Section 4.

Employees of the business that have access to the corporate weapons or body armour (including office staff) must hold a current employee approval linked to the Corporate approval.

Applications for the possession and use of Oleoresin Capsicum Spray (OC) or similar weapon require the applicant to have completed an approved training course within 3 months of submitting an application. Evidence of successful completion of the course must be attached to the application.

Employee applications (except Instructors) will only be approved for a period of 12 months or less.

Each section in the application has a corresponding instruction section for your assistance in completing the form.

See NT Police website <https://pfes.nt.gov.au/police/firearmsweapons> for additional information/forms.

Please ensure all sections are completed (write N/A if a section is not applicable) by typing in the interactive form or using black or blue pen only and provide all supporting documentation at the time of submission.

The fee **must** be paid upon submitting the application.

For clarification or enquiries, please contact Firearms Policy and Recording Unit (FPRU) on (08) 8922 3543 between 8 am and 11am Monday to Friday excluding public holidays or email firearmsregistry@pfes.nt.gov.au

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Instructions to complete your application

Section 1: Articles sought on Approval

Select the weapons category you are seeking an approval for. Tick the appropriate boxes.

An application for Oleoresin Capsicum Spray or similar weapon has additional requirements as stipulated throughout the application form.

Section 2: Personal Details

Provide your **legal** personal details (name, date of birth, gender, and place of birth) in the boxes provided.

Provide your **current** contact telephone details and email address. Firearms Policy and Recording Unit (FPRU) will use these contact details for all communications related to the application and if additional clarification or further information is required to process the application.

Provide your **current** NT drivers licence number and NT Weapons Act approval number (as applicable).

Section 3: Business/Corporate details (for employment applications)

Provide **current** Business/Corporate name. Attach copy of currently dated Business Registration.

Provide Corporate Weapons Act approval number (for existing approvals).

Provide details on what the main function of the business/corporation is.

Provide details on the applicants role in the company.

Provide business contact details and email.

Provide Australian Business Number (ABN) or Australian Company Number (ACN).

Provide Business physical address including postcode. Provide postal address.

If both the addresses are same, indicate "as above" in the Business postal address box.

Section 4: Reason for licence

Select the reason/s you are seeking the approval for. Tick all the appropriate boxes that apply.

Section 5: Employee application

Employment section is to be filled out by your employer or employer's representative providing all details as required on the form.

Provide a typed letter of intent, using the registered business letterhead (if applicable).

This letter is **crucial** as it justifies why you require the prohibited weapons or body armour to operate, and plays an important role in the determination of whether a Weapons Act approval is granted.

The letter **should** include the following points:

- The duties to be performed by the applicant.
- Specify the type of prohibited weapons or body armour required for the employee to carry out their duties and where they will be carried/used.
- Provide details of storage of the prohibited weapon or body armour when not being carried by the applicant and is outside of the permanent storage location (ie: when duties change during shift which no longer permits employee to carry the weapon eg – locked in a container / in the boot of a vehicle).
- For applications for OC Spray the letter must confirm that the applicant meets the requirements of section 13(2A) of the *Weapons Control Act 2001*.
- For applications for OC Spray the letter must detail which takeaway liquor outlet/s the applicant will be performing duties at.

- For applications for OC Spray the letter must confirm that the applicant has completed an approved training course within 3 months of the application being submitted
- If applying to be an Instructor to deliver training in respect of OC Spray, you must have completed an approved training course (in the use of OC Spray) as well as completed a course in instructional techniques delivered by a registered training organisation.

Section 6: Personal application

Provide a detailed written submission justifying the reasons for the application you have selected (each reason requires justification). You must provide sufficient information in support of your application for the Commissioner to consider.

Detail the types and amounts of prohibited weapons or body armour you intend to possess (noting you are required to apply for an Authority to Purchase a Prohibited Weapon or Body Armour – PF402, prior to purchasing /acquiring any prohibited item)

Section 7: Storage

It is a requirement of approval that safe and secure storage requirements be provided at the time of the application. (Personal applications only. Storage for employees is covered on the relevant Corporate approval.)

All prohibited weapons and body armour must be stored in a manner that ensures the item cannot be lost or stolen and that the item does not come into the possession of a person who is not authorised to possess it.

Section 8: Training Course – OC Spray applications only

Provide details of the Training Program or course (approved by the Commissioner) that you have completed and attach the course certificate to this application.

An applicant for OC Spray is also required to have completed a Provide First Aid course, equivalent or better. Attach the course certificate to this application.

Section 9: Privacy Disclosure

Information is authorised to be collected under Section 13 of the *Weapons Control Act 2001* and then shared with other law enforcement agencies under the exemption in Section 70(a) of the *Information Act 2002* (including the use of facial imagery to match with other police intelligence to detect/investigate the commission of offences).

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Having difficulty understanding?

You can use an interpreter service if you are having difficulty understanding the questions.

You can contact the Interpreting and Translating Service NT in person and by mail, email or phone:

Interpreting and Translating Service NT
Ground Floor RCG House
83-85 Smith Street
Darwin NT 0801

GPO Box 4621
Darwin NT 0801
Phone: (08) 8999 8506 or 1800 676 254
Email: itsnt@nt.gov.au