Northern Territory Police Force



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

Your current firearm licence must be sighted with this application. A separate fee is required for each firearm to be acquired.

Police use only
NT Firearms licence no:
Fee:
Receipt no:
Date:
SerPro no:
Firearm sighted: 🗌 Yes 🗌 No
Sighted by:
Purchase permit no:

Section 1: Firearms category *see note (Please tick @ appropriate boxes)

Firearm category				
A	В	□c	D	ПН

Note: Applicant must also complete appropriate purchase type in Section 4 i.e. Private purchase or dealer purchase etc. An application for category C, D or H firearm MUST provide supporting documentation (statement of need/reason)

Section 2: Business details

Business details				
Business name:	Corporate firearm licence no:			
Business phone number:	Business mobile number:			
Business email:				
Business address:				
Postal address:				
ABN:	ACN:			

Section 3: Employer representative details

Name			
Family name:	Given name/s:		Middle name/s:
Preferred name:	Gender: 🗌 Female	e 🗌 Male 🗌 Unspecified	Date of birth:
Current residential address:			
Current postal address:			
Home phone number:		Mobile phone number:	
Email address:			
Preferred method of contact:	Phone	Mobile 🗌 Email	

Section 4: Type of purchase or transfer *see notes

Type of permit					
Purchase permit					
NT Dealer purchase					
NT Dealers name:			NT Dealers licence no:		
Private purchase					
Sellers licence no:		Sellers name:			
State/Territory:		Sellers s	ignature:		
		Date pu	rchased:		
Interstate dealer purchase		Interstat	e dealer/Sellers licence no:		
Interstate dealer/Sellers name:			State/Territory:		
Overseas purchase / acquisition	Details:				
Note: For overseas purchase a 'Applicat	ion for Police Authorisation' – B709 must be co	ompleted and	submitted with the application.		
Transfer permit					
Ownership transfer	From Licence type:		то Licence type:		
	Licence no:		Licence no:		
Note: This transaction is charged as a transfer, not a purchase (e.g from a personally held firearms licence to a corporate licence) and must be the same individual (legal owner of the firearm/s in both the disposing and receiving licence).					
Interstate transfer (Firearr	ns transfer between other State/Territo	ry to Northe	ern Territory)		
Interstate licence no: State/Territory:					
Note: A copy of the Interstate Registration Certificate should be attached to avoid delays in processing.					

Section 5: Particulars of firearm intending to acquire or purchase *see note

Cat	Make/Brand	Model	Serial no.	Action	Caliber (e.g 300 Win Mag)	Cao	Barrel Length (Cat H only)

Note: A private sale must always provide the serial number.

Section 6: Storage address

Storage details

My storage/security facilities are located (Provide full address including post code):

Section 7: Business Representative Information disclosure *see note (Please tick @ appropriate box or boxes)

Failure to disclose information may result in refusal of this application (Select Yes if unsure	e)		
Do you have, or have you ever had, a Domestic violence order or other similar Restraining order issued against you? (including interstate and overseas)		Yes	No
If Yes, please provide details:			
Have you ever been refused a Firearms licence or permit or had a Firearms licence or permit suspended, revoked, or cancelled?		Yes	No
If Yes, please provide details:			
Have you ever appeared before a court of law, panel or judicial body of any kind, charged with any offence (regardless of the outcome)?		Yes	No
If Yes, please provide details:			
Do you have any charges presently before a court?		Yes	No
If Yes, please provide details:			
Have you ever suffered from a diagnosed mental health disorder e.g. chronic depression, PTSD? (If Yes please provide a report from your treating General Practitioner in support of your application) *		Yes	No
If Yes, please provide details:			
Have you ever threatened or attempted self-harm? (If Yes, please provide a report from your treating psychiatrist in support of your application) *		Yes	No
If Yes, please provide details:			
Do you have any physical or mental illness, condition or disorder which may render you unfit to possess a firearm? (If Yes, please provide a report for your treating General Practitioner in support of your application) *		Yes	No
If Yes, please provide details:			
Have you ever been treated for alcohol or drug related problems? (If Yes, please provide a report from your treating General Practitioner in support of your application) *		Yes	No
If Yes, please provide details:			
Have you ever been treated for serious impairment of eyesight? (If Yes, please provide a report from your treating General Practitioner in support of your application) *		Yes	No
If Yes, please provide details:			
Is there any other information that may assist in the determination of your application?		Yes	No
If Yes, please provide details:			

*Note – The medical reports must state that the treating doctor or psychiatrist "does not consider the applicant a risk to themselves or others if granted a Firearms Licence."

Section 8: Privacy disclaimer and declaration

Privacy disclaimer				
The Northern Territory Police Force (NTPF) is collecting information from your application to ensure compliance with legislation. This collection is authorised and required by the NT <i>Firearms Act</i> 1997 and NT <i>Firearms Regulations</i> 1997.				
Through national agreements the NTPF 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 NTPF by phoning 08 8922 3543.				
Declaration				
Declaration				
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</i> 1997 and acknowledge that a false statement in an application is an offence under Section 89 of that Act	Declared at (place)			
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</i> 1997 and acknowledge that a false statement in an application is an offence under	Declared at (place)			

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

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

Application for Firearms Purchase or Transfer Permit - Business

Police use only Checklist					
Application completed and signed					
Proof of Identity (100 points required)					
Evidence of NT Residency					
Interstate registration documents (if a	applicable)				
Application for Police Import Author	isation – B709 (if a	pplicable)			
Statement of need for acquiring category C, D and H firearms					
Documents relating to Information disclosure section (if applicable)					
Application entered on SaFER					
Receiving member to complete					
Member name (Print):	Signature of member receiving application:		Date received:		
Position/Rank:		Police station received at:			
Reg. no:					

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