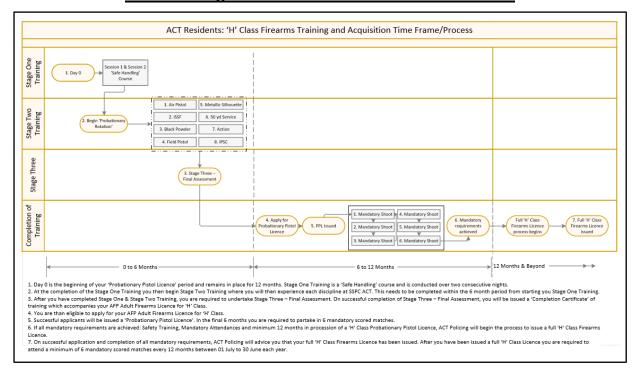


## Australian Capital Territory 'H' Class Firearms Application steps and process for new SSPC ACT members

- 1. Become a member of Sporting Shooters Pistol Club (SSPC ACT).
- 2. Undertake Phase 1 Safe Handling Course.
  - a. This is done over 2 consecutive nights. On successful completion the Chief Instructor or Accredited Training Officer will sign your 'Safe Handling Course' paperwork. With this completed you will move into Phase 3 of the ACT Probationary Shooters requirements.
- 3. Phase 3 Probation Rotation.
  - a. You will undertake what is known as 'Probation Rotation'. On this rotation you will visit each discipline that is conducted at SSPC ACT and gain a understanding and be able to ask questions of the members who shoot that discipline, and figure out if you would like to compete in that discipline.
  - b. This rotation is an ACT Regulation requirement and must be completed within six months. If not completed within 6 months as part of the ACT Probationary Pistol Licence you will need to begin the whole process again from the start.
- 4. Phase 4 Final Assessment.
  - a. On completion of Phase 3 you will be required before 6 months is contract the Chief Instructor or Accredited Training Officer to do your final examination.
  - b. On being deemed compliant and undertaken all the ACT Policing Firearms Training requirements as a Probationary Shooter, you will be issued with:
    - i. Safety Handling Course signed by the Instructor.
    - ii. Record of shooting experience during your time as a Probationary Shooter.
    - iii. Chief Instructor or Accredited Instructor signature and he club 'Approved & Authority' stamp on your 'Firearms Licence Application' form.
    - iv. Payment receipt from 'Access Canberra'.



## **ACT Training Process & Licence Issue - Flow Chart**

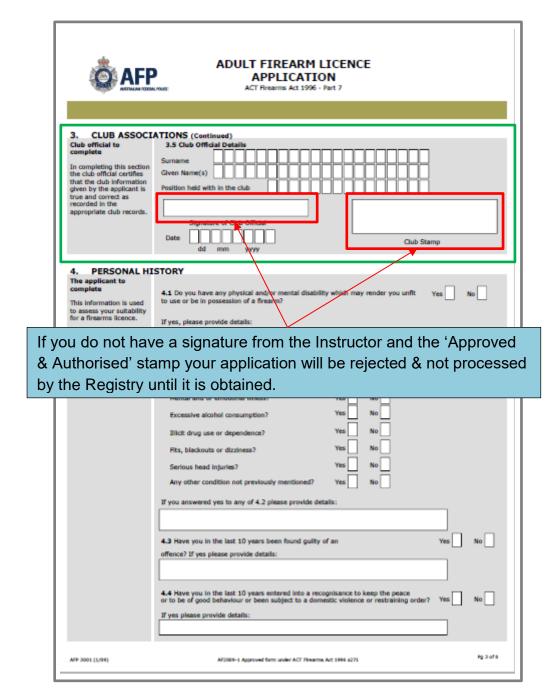


## What to do after you completed all your 'Training'.

5. Ensure that you have completed the AFP Adult Firearms Licence Application form. This form is located on the <u>ACT Policing - Firearms</u> website. https://www.police.act.gov.au/safety-and-security/firearms

| AFI  | ADULT FIREARM LICENCE APPLICATION ACT Firearms Act 1996 - Part 7  ACT Firearms Registry Use Only Licence Number: |
|--|--|
| You are requ                                     | ired to provide 100 points of identity with your application for a licence under this Act.                       |
| 1. APPLICANT                                     | DETAILS Please Use BLOCK LETTERS in dark pen only.   |
| The applicant to                                 | 1.1 APPLICANT DETAILS  Date of Birth   |
| complete.  | Surrame  |
|  | 1.2 Have you been known by any other names?  If yes, please provide details:  Yes No                             |
|  | Previous Surname   |
|  | Previous Given Name(s)   |
|  | 1.3 RESIDENTIAL DETAILS  |
|  | Street Number  |
|  | Street Name  |
|  | Suburb   |
|  | State Post Code  |
|  | 1.4 POSTAL ADDRESS (if different from above) Street Number   |
|  |  |
|  | Street Name  |
|  |  |
|  | State Post Code  |
|  | 1.5 CONTACT DETAILS  |
|  | Home Work Wolle  |
|  | Employer   |
|  | E-mail   |
| 2. LICENCE CLA                                   |  |
| The applicant to complete.                       | 2.1 Select the category of firearm(s) you are applying to be licenced to use and possess?                        |
| This information is                              |  |
| required to support your<br>genuine reason.      |  |
| Genuine Reasons<br>(See the Genuine              | A B C H  2.2 What is your Genuine Reason for having a firearm licence?   |
| Reason Guide for further details:                | and mile is your densitie respon for naving a modern sciencer  |
| •Sport or Target                                 |  |
| Shooting: Club Member, • Recreational Hunting or |  |
| Vermin Control on rural<br>land,                 |  |
| (Continued next page)                            | 2.3 What calibre of ammunition will you be using?  |

| <b>AFP</b>   | ADULT FIREARM LICENCE APPLICATION ACT Firearms Act 1996 - Part 7  |
|--|---|
| 2 17051105 014   |   |
| 2. LICENCE CLAS  The applicant to complete.  | 2.4 Have you ever held a firearms licence in the ACT or another state or territory in Australia? Yes No   |
| Genuine Reasons  | If no, move to 2.5.  If yes, what was your previous firearms licence Number?  |
| Primary Production,  | What category of firearm(s) were you licenced for?  |
| <ul> <li>Vertebrate Pest Animal<br/>Control,</li> </ul>  | What state was this licence issued in? A B C D H  |
| <ul> <li>Business or<br/>Employment,</li> </ul>  | ACT NSW VIC TAS QLD NT SA WA  |
| <ul> <li>Occupational<br/>Requirements relating<br/>to rural purposes,</li> </ul>                        | 2.5 Have you ever been refused a firearms licence? Yes No   |
| Animal Welfare.  | 2.6 Have you ever had a firearms licence cancelled or suspended? Yes No 2.7 If you answered yes to either 2.5 or 2.6, please provide the reason(s) why.   |
| If there is insufficient<br>space to complete a<br>question, please provide<br>additional details at the | 2.7 at you diswered yes to editer 2.5 or 2.0, peeple provide the reason(s) why.   |
| end of this application.   | 2.8 Have you completed the relevant firearms safety training? Yes No (All applicants that have not held a previous ACT Financial Liberca)   |
|  | You must provide proof of the successful completion of an approved firearms safety training   |
| 3. CLUB ASSOCI   | ATIONS  |
| The applicant to complete.   | 3.1 Are you a member of an approved shooting club that conducts competitions or activities requiring the Yes No If no, go to 3.2  |
| For applicants<br>applying for a<br>Category H firearms  | use of a firearm for which the licence is sought?  If yes please provide the following details and complete 3.3, 3.4 & 3.5:   |
| licence with a<br>genuine reason of  | Membership number   |
| Sport or Target<br>Shooting  | Gub Name  |
| For applicants<br>applying for a<br>Category A,B<br>firearms licence                                     | 3.2 Are you an active member of an approved shooting or hunting dub that conducts competitions or activities requiring the use of a firearm for which the licence is sought?  No lifno, go to 4.1 sought? |
| with a genuine<br>reason of Sport or<br>Target Shooting or   | If yes please provide the following details and complete 3.3, 3.4 & 3.5:  |
| Recreational<br>Hunting/Vermin   | Membership number   |
| Control  | Club Name   |
| It is the responsibility of<br>the applicant to provide<br>evidence each year of                         | 3.3 How often do you attend the dub?  |
| participation in club<br>shooting competitions, if<br>your genuine reason is                             | 3.4 Have you participated in any approved club competitions or Yes No   |
| Sport or Target<br>Shooting. Failure to do<br>so may result in the re-                                   | hunting activities since your last application?  If yes please provide name, location and date of the competitions and/or hunting activities you participated in during the previous year.                |
| fusal of your application.  If there is insufficient   |   |
| space to complete a<br>question, please provide<br>additional details at the                             |   |
| end of this application.  AFP 3001 (1/09)  | AF2009-1 Approved form under ACT Finance Act 1996 6271 Pg 2 of 6  |
|  |   |



**Note:** Ensure that you have both the Accredited Instructors signature and Club stamp before departing.

| AFF   | ADULT FIREARM LICENCE APPLICATION ACT Firearms Act 1996 - Part 7                       |
|---|--|
|   |  |
|   | ISTORY (Continued)   |
| The applicant to<br>complete  | 4.5 Are you an Australian citizen? Yes No If yes, go to 5.1                            |
| This information is used<br>to assess your suitability<br>for a firearms licence. | 4.6 If no, when did you arrive in Australia?  dd mm yyyy                               |
| If there is insufficient  | 4.7 What is your country of birth?   |
| space to complete a<br>question, please provide<br>additional details at the      | 4.8 Are you a permanent resident of Australia? Yes No                                  |
| end of this application.  | 4.9 Are you in Australia on a Visa? Yes No If no, go to 4.13                           |
|   | 4.10 What type of Visa do you hold?  |
|   | 4.11 What is the expiry date of your Visa?  dd mm yyyy                                 |
|   | 4.12 Have you ever been refused a Visa? Yes No   |
|   | 4.13 Have you ever been refused entry into or deported from Australia? Yes No          |
|   | If yes please provide details:   |
|   |  |
|   | 4.14 Do you have a passport? Yes No If no, go to 4.15                                  |
|   | If yes, what is the passport number?   |
|   | What is the country of issue?  |
|   | 4,15 Do you have a firearms licence issued by another country? Yes No if no, 90 to 5.1 |
|   | If yes, what is the firearms licence number?   |
|   | What is the country of issue?  |
| AFP 3001 (1/09)   | AE2009-1 Accordant form under ACT Stramma Act 1996 s221. In 4 of 6                     |
| AP 3001 (1/09)  | ANJUSEY-3 Approved SITTS UNDER ACT PREMITTE ACT 1995 SZFS P. P. 4 of 6                 |

| 5. STORAGE The applicant to complete.  5.1 How will your firearms be stored?  5.2 How will your ammunition be stored?  5.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?  6. APPLICANT DECLARATION The applicant to complete.  6. APPLICANT DECLARATION I declare that the answers I have given on this application are true and correct to the best of my knowledge. I understand that it is an offence to deliberately make a false or misleading statement. I agree to abide by the ACT Firearms Act 1996. I understand and agree to abide by all provisions related to the safe storage and security requirements as a required by legislation. I consent to Pulling making any enquiries necessary to  | <b>Ö</b> AFF                          | ADULT FIREARM LICENCE APPLICATION ACT Firearms Act 1996 - Part 7   |
|--|---------------------------------------|--|
| S.1 How will your firearms be stored?  S.2 How will your ammunition be stored?  S.2 How will your ammunition be stored?  S.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?  S.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?  S.4 APPLICANT DECLARATION  S.5 APPLICANT DECLARATION  S.6 APPLICANT DECLARATION  S.7 APPLICANT DECLARATION  S.8 APPLICANT DECLARATION  S.9 APPLICANT DECLARATION  S.1 APPLICANT DECLARATION  S.2 APPLICANT DECLARATION  S.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?  S.4 APPLICANT DECLARATION  S.5 APPLICANT DECLARATION  S.6 APPLICANT DECLARATION  S.7 APPLICANT DECLARATION  S.8 APPLICANT DECLARATION  S.9 APPLICANT DECLAR | ARTHLANIOSA                           | MAGNET ACT PRESIDE ACT 1990 - PART /   |
| 5.1 How will your firearms be stored?  Firearms and ammunition must be stored at an address with in the ACT.  5.2 How will your ammunition be stored?  5.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?  6. APPLICANT DECLARATION  6. APPLICANT DECLARATION  6.1 APPLICANT DECLARATION  Complete.  6.4 APPLICANT DECLARATION  Complete.  6.5 APPLICANT DECLARATION  COMPLETE AND A COMPLETE AND  |                                       |  |
| 5.2 How will your ammunition be stored?  6. APPLICANT DECLARATION The applicant to complete.  6. 1 APPLICANT DECLARATION DECLARATION I dedare that the answers I have given on this application are true and correct to the best of my knowledge. I understand that it is an offence to deliberately make a false or misleading statement. I agree to abide by the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand and agree to accept the ACT Firearms Act 1906. I understand ACT Firearms ACT Firearms ACT Firearms ACT Firearms ACT | 5. STORAGE The applicant to complete. | 5.1 How will your frearms be stored?   |
| 6. APPLICANT DECLARATION 6. APPLICANT DECLARAT | Firearms and                          |  |
| 5.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and annuntition?  6. APPLICANT DECLARATION The applicant to complete.  6.1 APPLICANT DECLARATION DECLARATION I declare that the answers I have given on this application are true and correct to the best of my knowledge. I understand that it is an offence to deliberately make a false or misleading statement. I agree to abide by the ACT Firearms Act 1996. I understand and agree to abide by all provisions related to the safe storage and security requirements as required by legislation. I consent to Police making any enquiries necessary to assess this application. I agree to my identifying information being checked with the Issuer or Official Record Holder.  Signature of person making the declaration dd mm yyyyy  ADDITIONAL INFORMATION  |                                       | 5.2 How will your ammunition be stored?  |
| 6.1 APPLICANT DECLARATION  DECLARATION  I declare that the answers I have given on this application are true and correct to the best of my knowledge. I understand that it is an offence to deliberately make a false or misleading statement. I agree to abide by the ACT Firearms Act 1996. I understand and agree to abide by all provisions related to the safe storage and security requirements as required by legislation. I consent to Police making any enquires necessary to assess this application. I agree to my identifying information being checked with the Issuer or Official Record Holder.  Signature of person making the declaration did mm yyyy  ADDITIONAL INFORMATION   | address with in                       | 5.3 What address (in the ACT) do you wish to nominate as the registered address to store your firearm(s) and ammunition?   |
| the ACT Firearms Act 1996. It understand and agree to abide by all provisions related to the safe storage and security requirements as required by legislation. I consent to Police making any enquiries necessary to assess this application. I agree to my identifying information being checked with the Issuer or Official Record Holder.  Signature of person making the declaration dd mm yyyy  ADDITIONAL INFORMATION   | The applicant to                      | 6.1 APPLICANT DECLARATION  DECLARATION  I declare that the answers I have given on this application are true and correct to the best of my knowledge.  |
| ADDITIONAL INFORMATION   |                                       | the ACT Firearms Act 1996. I understand and agree to abide by all provisions related to the safe storage and security requirements as required by legislation. I consent to Police making any enquiries necessary to assess this application. I agree to my identifying information being checked with the Issuer or Official Record Holder. |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   | ADDITIONAL                            | Signature or person making the declaration ///   |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
| Upon completion of this form please submit it in person at the ACT Firearms Registry   |                                       |  |
|  | Upon completio                        | n of this form please submit it in person at the ACT Firearms Registry.  |
| ACT Firearms Registry  |                                       | ACT Firearms Registry  |

GPO Box 401, Canberra ACT 2601 Phone: 02 61332122 Fax: 02 61332188 Email: actfirearmsregistry@afp.gov.au

AFP 3001 (1/09)

AF2009-1 Approved form under ACT Firearms Act 1996 s271

Fg S of 6

| ADULT FIREARM LICENCE APPLICATION ACT FIREARMS Act 1996 - Part 7   |
|--|
|  |
| ACT Firearms Registry Use Only.  |
| Receipt Number Amount \$ Receipt Date  |
| Date of Application dd mm yyyy  dd mm yyyy   |
| ID Verification Licence Conditions   |
| ID Type ACT Firearms Licence Drivers Licence Passport  Primary ID Number Secondary ID  |
| APPROVED NOT APPROVED Licence Issue Date — No earlier than 28 days from the day after the application date.  Printed Name and Badge Number dd mm yyyy dd mm yyyy |
| Licence Issuer Licence Receiver  |
| Signature of Essuing Officer  Signature of Receiver  Printed Name and Badge Number  Printed Name  Collect Mail   |
| dd mm yyyy   |
| AFP 3001 (1/04) AF2009-1 Approved form under ACT Firearms Act 1996 6271 Pg 6 of 6  |

- 6. Take the following documents to the ACT Firearms Registry:
  - a. AFP Adult Firearms Licence Application
  - b. Safety Handling Course Certificate.
  - c. Probationary Shooters experience logged shoots. This is the 'Probation Rotation' form that is provided to you at the completion of the Stage 1 and before beginning Stage 2 Training.
  - d. Payment receipt from Access ACT.

| 7. You must have all the above documentation with you when you appear at the ACT Firearms Registry. If any part of the above paperwork is missing the registry will not progress or process you application until it is submitted together.        |
|--|
| If you have any questions or concerns please ask the Chief Instructor, an Accredited Training Officer and/or the New Members Coordinator. Also the ACT Policing Firearms Registry and their website will be able to assist you with your enquires. |
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|  |
| ACT Probationary Pistol Licence Process remains the sole property and rights of SSPC ACT.  |
|  |