



FIREARMS AND BATONS ENDORSEMENT

Security & Related Activities (Control) Act 1996

Instructions to all applicants – follow all of these steps to complete your application.

You must carefully complete all sections and attach all required documents. Incomplete applications will not be accepted for processing. If you have any enquiries regarding the completion of this application, contact Police Licensing Services on 1300 171 011

◆ **Section 1**

Personal Details

- Enter your complete Name, Residential Address, Postal Address, Date and Place of Birth and all Telephone Numbers.
- Postal addresses can be marked 'As Above'.

◆ **Section 2**

Endorsement Category

- Select the endorsement(s) that you wish to have included on your Security Officer Licence and mark the corresponding box.
- Firearm endorsements require an accompanying letter from a licensed Security Agent who holds a Corporate Firearms licence, proof that you have successfully completed an approved Firearm course within the last six months, and a medical certificate (less than one month old) stating that you are physically and psychologically fit to use and carry firearms.
- Baton endorsements require proof that you have successfully completed an approved Baton course within the previous six months.

◆ **Section 3**

Employer Details

- List all employers who will be employing you in an armed capacity and provide their Corporate Firearms Licence Number.
- Ensure that there is an accompanying statement from each employer who intends to employ you in an armed capacity.

◆ **Section 4**

Signing the Declaration

- Do not sign this without a Member of the Police Service to witness.

Penalties apply for omissions, false or misleading information.

◆ **Section 6**

Relevant Documentation

- Employer's Statement relating to armed employment (firearm endorsement and baton).
- Proof of training course in firearms within the previous six months (firearm endorsement).
- Medical certificate certifying you to be physically and psychologically capable for the use and carriage of a Firearm. (firearm endorsement).
- Proof of training course in batons within the previous six months (baton endorsement).

◆ **Application Checklist**

- Correct endorsement nominated
- Employer's statement
- Course provider's certification
- Doctor's Certificate

Completed applications are to be lodged at :

Police Licensing Services
Mason Bird Building, 303 Sevenoaks Street
CANNINGTON WA 6107

Or

The nearest Country Police Station



WESTERN AUSTRALIAN POLICE FIREARMS AND BATONS ENDORSEMENT

Security & Related Activities (Control) Act 1996

Application must be completed in own handwriting

PERSONAL DETAILS	LICENCE NUMBER	
<input type="text"/> SURNAME:	<input type="text"/> GIVEN NAMES	
<input type="text"/> RESIDENTIAL ADDRESS		
<input type="text"/> SUBURB	<input type="text"/> POSTCODE	
<input type="text"/> POSTAL ADDRESS:		
<input type="text"/> SUBURB	<input type="text"/> POSTCODE	
PHONE <input type="text"/>	<input type="text"/>	<input type="text"/>
WORK	HOME	MOBILE

2 ENDORSEMENT

FIREARMS BATONS

3 EMPLOYER DETAILS

Include all companies for which you wish to be endorsed to carry firearms
(A letter must be attached from each company that wishes to employ you in an armed capacity)

1	<input type="text"/>	ADD / DELETE
Corporate Firearms Licence Number		
2	<input type="text"/>	ADD / DELETE
Corporate Firearms Licence Number		

4 Include all companies for which you wish to be endorsed to carry a baton. A letter must be attached from each company that wishes to employ you to carry a baton

1	<input type="text"/>	ADD / DELETE
2	<input type="text"/>	ADD / DELETE
3	<input type="text"/>	ADD / DELETE

5 Declaration

I, Certify that the information contained in this application has been provided by myself and is true and correct in every particular and that I completed this application in my own handwriting. I am aware that it is an offence under Section 51 of the Security and Related Activities (Control) Act, 1996 to provide false or misleading information, punishable by a fine up to \$10, 000

Applicants Signature Date / /

Witness Signature Date / /

Print Name, witnessing authority and contact details