

Application for an Employee Authority for a Firearms Dealer

ABN 43 408 613 180

This form is for employees of a firearms dealer and authorises possession only of firearms while employed by the firearms dealer specified on this application and only in connection with those employment activities.

This is an interactive form. Please complete all sections, print the form, have your employer complete Section F, sign the Declaration in Section H and submit with any supporting documentation to the **Firearms Registry, Locked Bag 1, Murwillumbah NSW 2484.**

Failure to complete all sections of this form and provide the required supporting documentation may result in delay or refusal of your application.

THIS APPLICATION IS FOR A - Please select appropriate box

New Application
 Reapplication
 Existing Employee Authority Number (if held)

A. APPLICANT DETAILS

Last Name
 Given Names
 Date of Birth
 Gender
 NSW Drivers Licence No.
 Day Time Phone No
 Mobile Phone Number
 Email Address

If you have been known by another name, please provide details below (Last Name, Given Names)

B. RESIDENTIAL ADDRESS

C. POSTAL ADDRESS - If the same as your residential address please mark this box

D. PERSONAL HISTORY - You MUST complete this section - select one box for each question

	YES/NO
Have you in NSW or elsewhere;	
a) Been refused or prohibited from holding a firearms licence or permit or had a firearms licence or permit suspended, cancelled or revoked?	<input style="width: 50px; height: 20px;" type="checkbox"/>
b) Are you currently subject to a Good Behaviour Bond for an offence referred to in question e) or an Interim Apprehended Violence Order?	<input style="width: 50px; height: 20px;" type="checkbox"/>
c) Been, or are presently, subject to a firearms/weapons prohibition order, other than an order that has been revoked?	<input style="width: 50px; height: 20px;" type="checkbox"/>
d) Have you ever attempted suicide or self harm, or in the past 12 months been referred or treated for alcoholism, drug dependence, or a mental or nervous disorder or illness?	<input style="width: 50px; height: 20px;" type="checkbox"/>
e) Within the last 10 years, been convicted of an offence involving firearms or weapons, prohibited drugs/ plants, fraud/dishonesty/stealing, prescribed restricted substances, terrorism, violence, robbery, organised criminal groups and recruitment, or an offence of a sexual nature?	<input style="width: 50px; height: 20px;" type="checkbox"/>
f) Within the last 10 years been the subject of a Apprehended Violence Order (other than an order which was revoked) or an injunction ordered by the Family Court?	<input style="width: 50px; height: 20px;" type="checkbox"/>

IF YOU ANSWERED 'YES' TO ANY OF THE ABOVE QUESTIONS, PLEASE PROVIDE DETAILS AS AN ATTACHMENT

