



ARMS LICENSE FORM

Application for Grant of New Arms License

INSTRUCTIONS:

1. A separate License form should be filled for each weapon
2. Form should be filled in English using capital letters
3. Use a ballpoint pen with Blue or Black ink.
4. Submit a photocopy of NIC with the application form
5. In case of weapon retainer fill a separate form of Retainer
6. All photographs should have blue background. The name and NIC number of the License must be written on backside of their respective photographs.

SECTION 1- PERSONAL INFORMATION

Name of Applicant

Father's Name

Present Address of Applicant (line 1)

Present Address of Applicant (line 2)

City

Province / Site

Permanent Address (line 1)

Permanent Address (line 2)

City

Province / Site

Police Station

Place & No. of Domicile

Details of Occupation

- Govt.Services
 Semi Govt.
 Corporation
 Armed Forces
 Autonomous Body
 Private
 Trade & Industry Commerce
 Agriculture
 Professional/Consultants
 Others

In Case of Government Servant, Name of Department

National Tax No.

Monthly Income

BPS

Qualification

SECTION II – LICENSE APPLIED FOR

Type of Weapon Applied for

- Pistol
 Revolver
 Shotgun
 Rifle
 Others

Weapons Caliber / requested for

Bore

Limit of Cartridges

Reason for need of Arms License Sports Protection Display Others

Do you already possess Weapons?

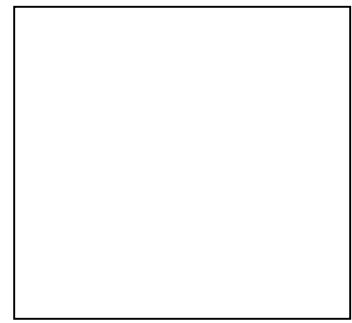
Yes

No

If yes, give reasons

SECTION III – DECLARATION

I hereby declare and certify that the above statements are true to be the best of my knowledge and belief, and understand that furnishing false or fabricated information will result in summary rejection of my application and in criminal prosecution.



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Signature

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Thumb Impression

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Official Use Only

FOR OFFICIAL USE ONLY

SECTION IV

RECOMMENDATIONS OF THE DISTRICT POLICE OFFICER/TOWN POLICE OFFICER
(In case of Government Servant recommendations of the Head of the Department)

- a. Certified that the details given above are correct to the best of my knowledge and belief.
- b. I recommend/not recommended the insurance of license.

	SIGNATURE	: _____
	NAME	: _____
OFFICIAL SEAL	DESIGNATION	: _____

RECOMMENDATION OF THE DISTRICT COORDINATION OFFICER

_____ OFFICIAL SEAL _____

Decision / Comments of Home Department

OFFICIAL SEAL OF HOME DEPARTMENT

LICENSE NO.	_____
DATE OF ISSUE	_____
TYPE OF WEAPON	_____
QUANTITY OF AMMUNITION ALLOWED	_____