

FORM A - 4
(for companies)
Form of application for renewal of licence(s) granted in
Form II, III and V
(See rule 24)

IDENTITY OF THE LICENSEE				
1.	UIN (16 digit)			
2.	Name of the licensee company (see Note 1)			
3.	Constitution of the licensee company			
	P.A.N./C.I.N.			
4.	Name of the responsible person			
5.	Address of the licensee company			
	Telephone No. (office)			
	Mobile Number of the responsible person			
	E-mail			
	*Nearest Police Station			
Licence particulars and weapon endorsements				
6.	Licence Number			
7.	Date of expiry	<i>DD/MM/YYYY</i>		
8.	Area Validity			
9.	Total Number of Weapons Endorsed			
10.	Details of Weapons	1	2	3
(a)	Type <i>(Rifle/Shot gun/Handgun)</i>			
(b)	Bore			
(c)	Weapon Number			
		<i>Separate list be attached for more than three weapons</i>		
11.	Ammunition allowed	Cartridges Gun Powder/ Percussion Caps		
OTHER PARTICULARS OF THE APPLICANT				
12.	Whether the applicant or its office bearers or directors or responsible person since the issuance/last renewal have ever been –			

(a)	convicted <i>(attach details in a separate sheet, if the answer is in affirmative)</i>	Y	N	<i>If yes, details thereof –</i> Offence Sentence Date of sentence DD/MM/YYYY
(c)	prohibited under the Arms Act, 1959, or any other law from having the arms or ammunition	Y	N	<i>If yes, details thereof –</i> Date DD/MM/YYYY Period for which prohibited
13	Whether -			
(a)	the applicant's licence since the issuance or last renewal was ever suspended or cancelled or revoked	Y	N	<i>If yes, details thereof –</i> Name of the licensing authority Reasons
(b)	the licensee has a safe place to keep the arms and ammunition	Y	N	<i>If yes, details thereof –</i>
(c)	the retainers appointed by the company have undergone training requirements as specified in rule 10 <i>(whenever made applicable by the Central Government)</i>	Y	N	<i>If yes, details thereof –</i>

Declaration:

I, _____, the responsible person (named in column 4) of _____ (company name), hereby declare that the above particulars given in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage, I personally as well as the company are liable to be proceeded against and action taken under the relevant provisions of the Arms Act, 1959, the Arms Rules, 2016, and other central enactments or the law for the time being in force.

*Signature with stamp of the responsible person
signing on behalf of the company*

Note:

1. Constitution of the company be mentioned –

Private Limited Company; Limited Company; Government undertaking; Society: Co-operative Society; Institute; University; Partnership Firm; Association of Persons (AOPs) or any other body under any special act or otherwise etc.

Warning:

Suppression of any factual information or furnishing of any false or wrong information in the Application Form in violation of arms rules will render the applicant company and the responsible person liable for punishment under Section 30 of the Arms Act, 1959.

Form S-2

Standard format of undertaking for safe storage of firearms

[See rule 10(4)]

To
The Licensing Authority,

Undertaking

This is to solely affirm and declare that –

1. I have applied for grant of a new arms licence/renewal of arms licence (bearing number _____ and my UIN is _____)
2. I undertake to practice safe storage of the firearm (in knocked down condition) when I am not carrying the firearm(s) with me.
3. I undertake to educate the children about the dangers of interacting with arms and ammunition.
4. I have the capacity to store the firearm safely and securely in a safe or steel almirah in order to minimize the risk that it could be stolen or accessed by someone else.

It is hereby solely affirmed that the declaration made above is true to the best of my knowledge and belief and if at any subsequent date, if any of the said declarations is found false or incorrect, I shall be liable for the same including cancellation or revocation of my licence and subject to penal provisions under the Arms Act, 1959.

Place: (Signatures of the Applicant/Licensee)

Date:

Note: Enclose proof of safe storage as mentioned at S.No. 4

Form S-3

Standard format of medical certificate

[See clause (g) of sub-rule (4) of rule 11)] (On the letter head of the medical practitioner)

This is to certify that I have carefully examined the person whose particulars are furnished below –

1	Name of the person examined	
2	Father's Name/Spouse Name	
3	Residential address	
4	Age and date of birth	
5	Height	
6	Weight (in Kgs)	
7	Blood pressure (please specify)	
8	Deformity, if any (particularly in upper limbs)	
9	Any other observation	

On the basis of examination, it is certified that the person examined as mentioned in column 1 above –

1. is in good physical health and is free from any physical deformity;
2. has been found to be of stable mental condition and is not inclined to violence;
3. has been found not dependent on any substance which has an intoxicating or narcotic effect.

Signature of the person examined *named in column (1)* _____

Signature of the medical practitioner _____

Registration Number _____

SEAL

Form S-4
Standard format of police report
(See rule 14)

DRAFT COVERING LETTER
Office of the DM/Commissioner of Police

Ref. No. _____

Date : _____

To

The Station House Officer,

Police Station _____,

_____.

Sub. : Report under section 13(2) of Arms Act, 1959 of the officer in charge of the nearest police station (of present address of the applicant) on application for grant of arms license or renewal of an arms licence

S.No.	Particulars	Contents
1	Name of the applicant	Mr./Mrs./Messrs
2	Nature of licence applied for (fresh applications)	
3	Licence No. (renewal application)	
4	Address of the applicant	

Note: As per provisions of Section 13(2) of Arms Act, 1959, on receipt of an application, the licensing authority shall call for the report from the officer-in-charge of the nearest police station on the application and such officer shall send his report within the prescribed time. Accordingly the report be sent in the format attached here within 30 days.

Enclosures:

Copy of application form (original)/renewal form along with enclosures

ANTECEDENT VERIFICATION REPORT

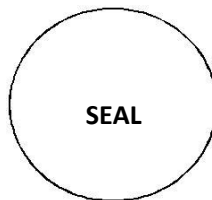
(TO BE FILLED IN BY THE POLICE DEPARTMENT)

1.	Name of the applicant		
2.	Father/Spouse Name		
3.	Present address		
	Nearest police station of the present address		
4. (a)	Whether the applicant has ever been convicted?	Yes	No
	If so, the offence(s) the sentence and date of sentence		
4. (b)	Ordered to execute a bond under Chapter VII of Code of Criminal Procedure, 1973 (2 to 1974) for keeping the peace or for good behavior.	Yes	No
	If so, when and for what period?		
4. (c)	Prohibited under the Arms Act, 1959, or any other law from acquiring, having in his possession or carrying any arms or ammunition		
	If yes, the details thereof		
5.	Has the applicant any serious enmity or quarrel which is likely to lead to a breach of peace? If yes, Give details	Yes	No
6.	Has the address and date of birth of the applicant been verified? Give details.	Yes	No
7.	Has the profession/business of the applicant been verified? Give details.	Yes	No
8.	Is any complaint registered against applicant in the Police Station? If so, give details.	Yes	No
9.	Is the applicant involved in any criminal case? If so, give details.	Yes	No

10.	Has applicant been arrested in any criminal case? If so, give details.	Yes	No
11.	Is applicant's name enlisted in police station's bad character register? If so, give details according to the records of police station?	Yes	No
12.	Is applicant's name appears in any case registered by other department of Government of India such as CBI, Narcotics Control Bureau, DRI, Enforcement Directorate etc. which finds mention in the Daily Diary Register of the police station (summons, warrants etc.). If so, give details.	Yes	No
13.	Has the applicant registered a complaint in Police Station regarding threat to life? If so, give details.	Yes	No
14.	Detail of any political or communal organisation of which the applicant is a member.		

Certified that, I have checked the contents of the application form for grant of arms licence submitted by the applicant.

Dated:



Signatures
SHO
Police Station

