

ANNEXURE "A"

Suid-Afrikaanse Polisiediens South African Police Service

DECLARATION IN TERMS OF REGULATION 86 OF THE FIREARM CONTROL REGULATIONS, 2004 (SAFE KEEPING FACILITIES)

A.	**PARTICULARS OF THE FIREARM LICENCE HOLDER/APPLICANT**

NATURAL PERSON`S DETAILS

Surname																
Full Names																
Identity number of natural person							-					-			-	
Passport number of natural person																
Residential address																
												Postal Code				

STATE UNDER OATH IN ENGLISH/ SOLEMLY AFFIRM TO THE FOLLOWING:

I acknowledge that the approval of the firearm licence application and the issuing of the relevant licence, permit or authorisation is subject to myself providing proof to the Registrar of my ability to safely store the firearm in accordance with the law.

The fact that the application had been accepted by the registrar and that it is being processed and considered prior to my ability to proof compliance with the law in respect of the safe custody does not confer on my any right or legitimate expectation that my application will be considered favourably.

I acknowledge that Regulation 86 (1) reads as follows:

"When a firearm is not under the direct personal and physical control of a holder of a licence, authorisation or permit to possess a firearm, the firearm and its ammunition must be stored in a safe or strong room that conforms to the prescripts of SABS Standard 953-1 and 953-2, unless otherwise specifically provided in these regulations."

I therefor swear under oath/solemnly affirm* that I am in possession of the prescribed safe which conform to the prescripts of SABS Standard 953-1/ SABS Standard 953-2*.

B.	**PARTICULARS OF SAFE STORAGE FACILITY (mark applicable block)**		
Safe		**Strong room**	
Short description of the safe or strong room			
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.....			
.....			
.....			
.....			

***DELETE WHICHEVER IS NOT APPLICABLE**

C. I HEREBY SWEAR UNDER OATH/ SOLEMNLY AFFIRM* THAT THE ABOVE SAFE/ STRONGROOM* HAS BEEN PROPERLY INSTALLED AND MEETS WITH THE REQUIREMENTS OF SABS STANDARDS 953-1/ SABS STANDARDS 953-2* FOR THE SAFEKEEPING OF FIREARMS AND OR AMMUNITION.

Initial and Surname of firearm licence holder

Signature of firearm licence holder/ app

D. CERTIFICATION

I CERTIFY THAT THE SWORN DECLARATION/ SOLEMN AFFIRMATION* WAS SWORNTO/ AFFIRMED BEFORE ME AND THE LICENCED FIREARM OWNER/ APPLICANT HAS KNOWLEDGED THAT SHE/ HE KNOWS AND UNDERSTAND TO CONTENTS OF THIS DECLARATION. THE LICENCED FIREARM OWNER/ APPLICANT`S SIGNATURE WAS PLACED THEREON IN MY PRECENCE ON (day)……..(month)…….(year)…… AT (time)……..h……..AT (place)……

Name of Designated Firearm Officer/police official in Block letters

Date _ _ _ _ – _ _ – _ _

Rank of Designated Firearm Officer/ police official in block letters

Place

Signature of Designated Firearm Officer/police official

Persal number of Designated Firearm Officer/police official

OFFICIAL DATE

DATE RECEIVED

***DELETED WHICHEVER IS NOT APPLICABLE**