

APPLICATION FOR RENEWAL OF INDIVIDUAL FIREARM LICENSE

(Requirement & Instruction to applicant: Please see page 2)



ADMIN CONTROL -

DATE: / /
Day Month Year

Chief, Philippine National Police
(Attn: Chief, FED)
Camp Crame, Quezon City

Kind of License applied for

RL SP SCR SRL

May I respectfully request for the renewal of my firearm license. My personal details, firearms data and compliance to other requirements in connection with my license to possess firearm are stated below.

WITH CHANGES NO CHANGES

Owner (Agency)

Last Name:

First Name:

Middle Name:

Address:

E-mail Address:

Tel. No.:

Date of Birth: / /
Day Month Year

Place of Birth:

TIN No.: - -

2" x 2"
(Colored PHOTO w/
white background)

Affix signature
On the left side
Of the picture

Qualification: Businessman/Overseas Private Employee/Individual Elected Official PNP/AFP/BJMP/BFP
Specify: _____ Rank _____ Branch _____

Professional Government Employee Gov' Official Ret .PNP/AFP/BJMP/BF
Specify: _____ Rank _____ Branch _____

Others Retired Gov't Emp Official Retired Private Emp./Official Reservist
Specify: _____ Rank _____ Branch _____

FIREARMS INFORMATION

Source of Firearm (Dealer/Transfer/Amnesty)	Kind	Make	Model	Serial No.	Caliber

RECEIVED BY:

Name/Signature

DATE: _____

UNDERTAKING

I HEREBY CERTIFY that all statements are true and correct. I further certify that I have no *criminal conviction or pending criminal administrative case* before any court of law or administrative body as of this date. Neither is the firearm described herein involved in any case before any court of law or administrative body as of this date.

Licensee's Signature over Printed Name

SUBSCRIBER AND SWORN to before me this _____ day of _____ 20____
applicant exhibited to me his/her Residence Certificate No. A _____ on _____ 20____

NOTARY PUBLIC

RECEIVED BY:

Name/Signature

DATE: _____

(TO BE FILLED-UP BY AUTHORIZED PROCESSOR)

This will serve as your claim stub. Present this stub in claiming the firearm license card.

NAME OF LICENSEE _____
Family Name First Name Middle Name

FIREARMS DESCRIPTION _____
Kind Make Model Serial No. Caliber

INSTRUCTIONS TO APPLICANT

1. This application (2 copies) is good for one (1) firearm only.
2. Fill up all information required or place NA if “not applicable”. Affix your 2” x 2” colored picture in the space provided in this application form.
3. If there is change in any data (like address, qualification, etc.) indicate the change in the appropriate spaces. Attach a copy of the document validating the change.
4. **WARNING:** Before signing this document, read carefully the UNDERTAKING. Aside from certifying the correctness and truthfulness of your entries, you are also stating you have no criminal conviction or pending criminal case as of the date of your signature. Your certification will be subject to verification. Any misdeclaration in this document will be a basis for the cancellation of your license and confiscation of your firearm without prejudice to the filing of the appropriate criminal case.
5. Attach the original or authenticated photocopy (duly authenticated by the agency/office issuing the document) of the following documents to the application form:
 - ~~☒~~ ~~☒~~ Old firearm license
 - ~~☒~~ ~~☒~~ Special Bank Receipt (SBR) showing payment for firearm license fee and license card fee
 - ~~☒~~ ~~☒~~ Certificate of Attendance to a Gun Safety Seminar
 - ~~☒~~ ~~☒~~ Firearms Bond
 - a. private individual – receipt showing payment for Firearms Bond
 - b. government employee are exempted – in lieu, current Oath of Office or Certificate of Duty Status.
6. **Application form with lacking entries will not be accepted for processing.** Please ensure that information and documents required are complete before submitting your application.
7. File your application with the Operations Branch of the Provincial Police Office/City Police Office or Regional Operations and Plans Division (ROPD) of the Police Regional Office whose jurisdiction covers your indicated address in the firearm license or directly at the Firearms and Explosives Division in Camp Crame, Quezon City.
8. Your license card will be released upon the presentation of your claim stub.