

Y / N Authorisation emailed direct to seller

Original purchase order attached (if relevant)

Copy of this application (and purchase order) filed)

OR mailed direct to seller

## Mail Order Sales of Standard Sporting Firearm(s), Airgun(s) and /or Ammunition

Authorisation

expiry date

Application date: NZ Police Mail Order Sales - Section 43A, Arms Act, 1983 SECTION 1 PURCHASER TO FILL IN ALL RELEVANT DETAILS IN THIS SECTION **SELLER / SUPPLIER:** Surname: Forename(s): Date of birth if not a licence holder: Phone No: **Business** Email: name: Firearms Licence No: Expiry date: FIREARM(S) OR AIRGUN(S): Quantity Description (e.g. Rifle) Make Model Calibre Serial Number **AMMUNITION:** Type of firearm(s) the ammunition will be used in No. of boxes No. rounds per box Quantity Type Calibre **PURCHASER DETAILS:** Surname: Forename(s): Purchaser's delivery address: Sellers reference or Invoice No: (For firearms, must be licence holder's, Courier, Mail Co, or Firearms Dealer's address only) You may append pages to this application The above address is my own: Courier: Mail Co: Firearms Dealer: if there is insufficient room. Phone No: Email: Expiry date: Firearms Licence No: Date of birth if not a licence holder: Purchaser's signature: PROOF OF AGE: Required when purchasing an airgun and do not have a firearms licence Letter of support from **Drivers licence No: Expiry date:** Airgun Club attached, if purchasing restricted Other NZ Government issued airgun from licensed Issue No: Expiry date: photo ID: Document attached Firearms Dealer **SECTION 2** POLICE USE – POLICE MEMBER RECEIVING APPLICATION Purchaser's ID verified Firearm(s), Airgun(s), Ammunition correct **Receiving Officer** signature or stamp: Purchaser's licence sighted and Delivery address for this purchase confirmed as current (NIA checked) checked and (NIA checked) Designation and date: SECTION 3 POLICE USE - TRANSACTION AUTHORISATION BY ARMS OFFICER I have inspected both the Seller's and Purchaser's Firearms Licence records (or relevant identification records where this application relates to airgun purchases) and I am satisfied that he / she is a fit and proper person to purchase the Firearm(s), Airgun(s) and / or Ammunition listed herein. Member of Police: OID: Designation: Station: Arms Office phone no:

Approving Police

Employee signature

or stamp and date: