

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

Revision 11 / 2016

NZ Police Mail Order Sales – Section 43A, Arms Act, 1983

Application date: Day / Month / Year

SECTION 1 PURCHASER TO FILL IN ALL RELEVANT DETAILS IN THIS SECTION

SELLER / SUPPLIER:

Surname:	<input type="text" value="BARRY"/>	Forename(s):	<input type="text" value="CLAYE CHARLES"/>
Date of birth if not a licence holder:	<input type="text" value="Day / Month / Year"/>	Phone No:	<input type="text" value="Mobile"/> (03) 553 1255
Business name:	<input type="text" value="GUN CITY RICHMOND"/>	Email:	<input type="text" value="rchmailorder@guncity.co.nz"/>
Firearms Licence No:	<input type="text" value="T5250383"/>	Expiry date:	<input type="text" value="11 / 09 / 2021"/>

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:	<input type="text"/>	Forename(s):	<input type="text"/>
Purchaser's delivery address: <i>(For firearms, must be licence holder's, Courier, Mail Co, or Firearms Dealer's address only)</i>	<input type="text"/>		Sellers reference or Invoice No: Date: <input type="text"/> Day / <input type="text"/> Month / <input type="text"/> Year
The above address is my own: <input type="checkbox"/> Courier: <input type="checkbox"/> Mail Co: <input type="checkbox"/> Firearms Dealer: <input type="checkbox"/>	<input type="checkbox"/> You may append pages to this application if there is insufficient room.		
Phone No:	<input type="text" value="Mobile"/> <input type="text" value="Home"/>	Email:	<input type="text" value="If you do not have email please provide street address"/>
Firearms Licence No:	<input type="text"/>	Expiry date:	<input type="text" value="Day / Month / Year"/>
Date of birth if not a licence holder:	<input type="text" value="Day / Month / Year"/>	Purchaser's signature:	<input type="text"/>

PROOF OF AGE: Required when purchasing an airgun and do not have a firearms licence

Drivers licence No:	<input type="text"/>	Expiry date:	<input type="text" value="Day / Month / Year"/>	<input type="checkbox"/> Letter of support from Airgun Club attached, if purchasing restricted airgun from licensed Firearms Dealer
Other NZ Government issued photo ID: Document attached	Issue No: <input type="text"/>	Expiry date:	<input type="text" value="Day / Month / Year"/>	

SECTION 2 POLICE USE – POLICE MEMBER RECEIVING APPLICATION

<input type="checkbox"/> Purchaser's ID verified <input type="checkbox"/> Purchaser's licence sighted and confirmed as current (NIA checked)	<input type="checkbox"/> Firearm(s), Airgun(s), Ammunition correct <input type="checkbox"/> Delivery address for this purchase checked and (NIA checked)	Receiving Officer signature or stamp: Designation and date:	Signature QID Designation <input type="text"/> Day / <input type="text"/> Month / <input type="text"/> Year
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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:	<input type="text"/>	QID:	<input type="text"/>	Designation:	<input type="text"/>
Station:	<input type="text"/>	Email:	<input type="text"/>	Arms Office phone no:	<input type="text"/>
<input type="checkbox"/> / <input type="checkbox"/> Authorisation emailed direct to seller <input type="checkbox"/> OR mailed direct to seller <input type="checkbox"/> Original purchase order attached (if relevant) <input type="checkbox"/> Copy of this application (and purchase order) filed	Approving Police Employee signature or stamp and date:	<input type="text"/> Day / <input type="text"/> Month / <input type="text"/> Year	Authorisation expiry date	<input type="text"/>	