Post your completed form to:

Licensing & Regulation Division

Victoria Police Centre GPO Box 2807 MELBOURNE 3001

Phone: 1300 651 645 Ird@police.vic.gov.au





VICTORIA POLICE

Victorian Firearms Personal Information Form

| Part 1 – Purpose of form | | | | |
|--|--|--|--|--|
| (Cross the relevant box below) | | | | |
| This form is for: | | | | |
| New Nominated Person – Body Corporate | | | | |
| New Responsible Person – Body Corporate Change of Nominated Person – Body Corporate | | | | |
| New Natural Person – Licensed Firearm Dealer Change of Responsible Person – Body Corporate | | | | |
| New Partner – Licensed Firearm Dealer | | | | |
| New Employee – Licensed Firearm Dealer Change of Partner – Licensed Firearm Dealer | | | | |
| New Employee – Licensed Firearm Dealer Change of Nominated Officer – Approved Club | | | | |
| New Close Associate – Licensed Firearm Dealer Change of Club Office Bearers – Approved Club | | | | |
| Provide the name of the Body Corporate, Government Department, Licensed Firearm Dealer, Approved Club and (if known) Firearm Licence / Approval Number | | | | |
| (Name) (Licence / Approval number) | | | | |
| | | | | |
| | | | | |
| Part 2 – Personal information | | | | |
| Current Name | | | | |
| Family name Image: Comparison of the second secon | | | | |
| First given name | | | | |
| | | | | |
| Second given name | | | | |
| Third given name Date of birth: | | | | |
| Previous name(s) If "yes", staple a certified copy of your change of name certificate to the back of this application. Refer to part 2 in the Instruction pages. Have you ever been known by another name (not including official name changes)? Yes No If "yes", staple a certified copy of your change of name certificate to the back of this application. Refer to part 2 in the Instruction pages. | | | | |
| Residential address Property name (if applicable) | | | | |
| | | | | |
| Flat / Unit number Street number Lot number | | | | |
| | | | | |
| Street name Street type Street name | | | | |
| | | | | |
| Town / Suburb State Postcode | | | | |

Attach Medical Report here (if applicable)

Part 2 – Personal information (continued)

| Postal address (only complete this section if you want correspondence forwarded to an address different to your residential address) Box/Bag/Street |
|---|
| GPO box PO box Locked bag Private bag RSD RMB |
| Street name (RD, ST, AVE, etc) |
| |
| |
| Town / Suburb State Postcode |
| |
| |
| Contact details and driver's licence Telephone |
| |
| (Home) (Mobile) |
| Driver's licence |
| (Work - Optional) State of issue |
| |
| Email address (indicate exact case) |
| |
| |
| |
| Part 3 Modical history (All applicants must complete this part uplace it relates to an Approved Club application or approved |
| Part 3 – Medical history (All applicants must complete this part unless it relates to an Approved Club application or approval |
| Do you currently have any medical or psychiatric conditions or impairments that may directly impact your ability to hold |
| a licence, registration or approval for the reasons or activities being applied for or renewed? |
| In the past 5 years have you been treated for: |
| Mental health conditions including, but not limited to, depression or stress? |
| Alcohol or drug related problems? |
| A physical disability or any other medical condition (e.g. neurological, stroke or brain injury) which could Yes No |
| If you answered 'yes' to any of the above questions you must obtain a medical report (see instruction pages). |
| The medical report <u>must</u> : |
| Be legible and written on the letterhead of the relevant registered medical practitioner who is, or has been, treating you or is familiar with your conditions; |
| Outline the medical conditions for which you are being, or have been, treated; |
| State whether your current or past medical conditions may prevent you for being a fit and proper person to hold a licence, |
| registration or approval for the reasons or activities being applied for or renewed; and |
| • Be signed and dated by the relevant registered medical practitioner. Please note that the medical report must be current . |
| Part 4 – Previous history (All applicants must complete the first three sections for this part) |
| Section 1: Offences |
| Have you ever been found guilty (with or without Yes No Yes No |
| If you answered 'yes', in which State and Country? State Country |
| Do you have charges pending for any offence in Australia or Overseas? |
| If you answered 'yes', in which State and Country? State Country |
| Section 2: Licence Refusal/Cancellations |
| Have you ever been refused a licence or permit for a firearm? |
| Have you ever had a licence or permit for a firearm cancelled? |

| Part 4 - | Previous | History (| (continued) | ۱ |
|----------------------|-----------|------------|-------------|---|
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| Section 3: Full or final intervention order Have you ever been subject to a full or final Intervention Order or Family Violence Safety Notice? If you answered 'yes', have you applied successfully to a court to be deemed not a Prohibited Person (this is not necessary if you have only been subject to an Interim Intervention Order? | | | | | |
|---|--|--|--|--|--|
| Section 4: Application to be deemed not to be a Prohibited Person If you have made an application to be deemed not to be a prohibited person in either section 1 or 3, indicate the court and date of your application. | | | | | |
| Court Date / / | | | | | |
| Part 5 – Fingerprints | | | | | |
| Have you had a full set of fingerprints taken? (See instruction pages) | | | | | |
| Part 6 – Firearm Safety Course (All applicants are recommended to attend a firearm safety course, if handling firearms) | | | | | |
| Have you attended a longarm or handgun safety course? Course certificate is to be attached. (<i>See instruction pages</i> Yes No | | | | | |
| Part 7 – Identification reference | | | | | |
| Have you previously held an Interstate Firearm Licence? | | | | | |
| Do you hold a current Victorian Firearm Licence, Security Licence, or CCP Weapons approval? If you answer 'yes' please indicate the licence / approval number: (You do not have to provide any further information for part 7) – Go to part 8 If you answer 'no' you must provide 100 points of certified identification documents (signed by your referee), being | | | | | |
| one form of primary identification and one or more forms of secondary identification documents (See instruction pages part 7) and arrange for the below declaration by referee to be completed. | | | | | |
| Declaration by Referee and signature by applicant This declaration must be made by an 'Acceptable Referee' as listed in the instruction pages. The 'Acceptable Referee' must have personally known the applicant for at least 12 months. The applicant's signature must be completed in the presence of the referee. | | | | | |
| I, the Referee, (Full name of Referee) of (Address of Referee) | | | | | |
| declare that I have known ^(Full name of applicant) for a period of years and months Type of Acceptable Referee (Refer to part 7 of instruction pages for list of acceptable referees) Referee to loophone ^(Home) (Work) (Mobile) | | | | | |
| Referee telephone (Home) (Work) (Mobile) | | | | | |

Part 7 – Identification reference (continued)

| Decla | ration by referee an | d sig | gnature by applicant (continued) | | | | | |
|--|--|------------|---|------------|--------|-------|---------|---|
| e in | I, the applicant, am provid | ing th | e following certified identification documents - | | | | | |
| plet | Identification | | | | | | | 1 |
| complete of referee | Documents | | | | | | | 1 |
| Applicant to complete presence of referee | | | (Insert document descriptions from Part 7 of the | e instruct | ion pa | ges.) | | |
| Appl pr | Applicant's signate | <u>ire</u> | | | | | | |
| Referee to complete | I, the Referee, also certify that the above details are true and correct, the applicant's signature above was completed in my presence, and the Identification Documents I have signed are a true copy of the original. I am aware that it is an offence under the <i>Firearms Act 1996</i> to knowingly or recklessly make a statement in support of the application of another person under the Act which is false or misleading in any material particular (maximum penalty 240 penalty units or 4 years imprisonment). | | | | | | n of | |
| | Referee's signatur | e | | Date | | / | / | |
| Certified copies (copies to be signed by the referee) of your identification documents must be attached to this application. | | | | | | | | |
| | | | | | | | | |

Part 8 – Acknowledgement

| I acknowledge that the particulars in this application and any attachments are true and correct and I make this acknowledgement knowing that it is an offence against section 140A(1) of the <i>Firearms Act 1996</i> to wilfully supply details that are false or misleading (maximum penalty 240 penalty units or 4 years imprisonment). | | | | | |
|--|--|------|---|---|--|
| Signature | | Date | / | / | |
| | | | | | |
| | | | | | |

Privacy Statement:

The personal and health information requested is being collected and used by Victoria Police for the purposes of assessment of an application for a licence, registration, permit or approval. It will be used in accordance with relevant legislation, including the *Firearms Act 1996, Private Security Act 2004, Control of Weapons Act 1990, Health Records Act 2001* and the *Privacy and Data Protection Act 2014.* The information may be disclosed to employers, approved bodies and other statutory authorities for the purposes of law enforcement and the administration of justice. To gain access to personal and health information held by Victoria Police, you must apply in writing to the Freedom of Information Division of Victoria Police, at <u>www.police.vic.gov.au</u>.

Instruction pages for Personal Information Form

General – instructions for the completion of your Personal Information Form

Who should complete the Personal Information Form (PIF)?

The following people should complete the Personal Information Form:

- Nominated Person, and all responsible persons (example, officers of the Body Corporate, such as the director, secretary, executive officers etc.), close associates etc.) of a Body Corporate;
- Natural person Licensed Firearm Dealer;
- Partners of a firearm dealer business (if they have access to, contact with and/or control of the partnership firearms);
- Employees of Licensed Firearm Dealer;
- Nominated Officers of Approved Clubs; and
- Club Office Bearers of Approved Clubs (not appointed as nominated officers).

This form should also be completed if there are any changes to the above positions during the currency of the Firearm Licence, Approved Club Approval or Control of Weapons Authority.

How to use these instruction pages

There are 8 parts to this form. These instruction pages will assist you in the completion of the form.

- The form is to be completed in black or blue pen only.
- Attach copies of required documents securely to this form and forward to Licensing & Regulation Division, GPO Box 2807, Melbourne 3001.
- Contact Licensing & Regulation Division on telephone number 1300 651 645 or email us at Ird@police.vic.gov.au
- Website <u>www.police.vic.gov.au</u>

High quality copies of documents must be provided but do not send originals. If documents are not clear your application will be returned for corrective action.

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Identification documents include:

- Passport
- Drivers Licence
- Credit card
- Medicare card
- Membership cards of shooting clubs or organisation
- Gaming Licence

Under no circumstances should liquid paper be used on application forms or other documents.

Entering information

All dates must be in the format DD/MM/YYYY. For example:

Please print in capital letters and avoid contact with the edge of the box. The images on the right are a **<u>good example</u>** of how to fill in the boxes.

The example on the right has been filled in incorrectly. Printing touches or crosses the lines of the boxes. Printing like this will result in application processing delays.

When you are asked to make a choice, select boxes like this:

Not like this:

Part 1 – Purpose of form

How to complete part 1

- 1. Cross the box applicable to the reason for completing the form.
- 2. "Club Office Bearers Approved Club" is to be selected if a person is not a nominated officer.
- 3. Enter the name of the Body Corporate Government Department or Licensed Firearm Dealer and (if known) the Firearm Licence / Approval Number.

X Yes

Yes

Part 2 – Personal information

How to complete part 2

Provide your current personal details in the boxes provided. Make sure to leave a space between words. Cross the appropriate box to indicate if you are male or female.

If you have ever changed your name, you must provide a <u>certified</u> copy of your change of name certificate or full birth certificate that includes the schedule of any name changes or a marriage certificate.

You must provide your email address, driver's licence number and contact telephone details to enable Licensing & Regulation Division to contact you if a problem is encountered in the processing of your application. When providing your email address, make sure you indicate the exact case.

Part 3 – Medical history (All applicants must complete this part unless it relates to an Approved Club application or Approval)

If you answer 'yes' to any question, you must supply a medical report, go to: <u>www.police.vic.gov.au/firearms-forms-and-reference-information</u> on the website for the Quick Guide 'Role of the Health Professional' regarding your suitability to hold a firearm licence stating that; you are a fit and proper person to be in possession of firearms and/or a firearm licence and that you pose no threat to yourself or the community. This section does not have to be completed if this form is being completed in relation to an Approved Club application or Approval.

Part 4 – Previous history (All applicants must complete each section in this part)

| Simply cross 'yes' or 'no' in response to each question, and supply the additional information requested, if it applies to you. | | | | | |
|---|--|--|--|--|--|
| Offences | 'Charges Pending' means formally charged with an offence which is currently awaiting a court appearance. | | | | |
| | In relation to 'Found Guilty', it does not matter how long ago you were found guilty or what penalty was | | | | |
| | imposed. If you answer 'yes', indicate the State and/or Country. | | | | |
| Full or Final | If you have been subjected to a full or final (not interim) Intervention Order, you are required to indicate the | | | | |
| Intervention Order | | | | | |
| | prohibited person. Please indicate if you have done this. Attach the certified Court Extract if you were | | | | |
| | subsequently deemed not to be a Prohibited Person. | | | | |

Part 5 – Fingerprints

Fingerprints must be provided, if not previously taken for the purpose of firearms. For information on booking a fingerprint appointment, go to: https://www.police.vic.gov.au/fingerprinting. Fingerprinting fees can also be accessed on this site.

- A natural person Firearm Dealer; partner of a Firearm Dealer business (if they have access to, contact with and/or control of the partnership firearms); nominated person and any other responsible persons of a Body Corporate Firearm Dealer; or employee of a Firearm Dealer;
- Nominated and any other responsible persons of a Body Corporate (for all licence categories); and
- Natural person licence applicants for the following categories:
 - Handgun licence
 Category D longarms
 Category E longarms
 Firearm Collectors

Note: Fingerprints are not required if this form is being completed in relation to an approved club application or approval or if you are employed solely for the purpose of officiating at a paintball game.

Part 6 – Firearm Safety Course (All applicants are recommended to complete a firearm safety course, if handling firearms)

It is recommended that Licensed Firearm Dealers and their employees undertake a Firearm Safety Course to meet their lawful obligations under WorkCover to create a safe and healthy workplace. For applicants other than Licensed Firearm Dealers and employees, the Firearm Safety Course must be completed, and the course certificate must be submitted with this application. If you have any queries about Firearm Safety Courses, go to www.police.vic.gov.au/eligibility-requirements#firearm-safety-courses on the website.

Part 7 – Identification reference

To prove your identity, you are required to provide 100 points of identification unless you hold a Victorian Firearm, Security or Weapons licence/approval. This must be a <u>certified copy</u> of one primary identification document <u>and certified copies</u> of one or more secondary identification document(s) equal to, or more than 100 points from the list below.

| Primary identification (only one allowed) | Points | Secondary identification (continued) | Points |
|---|--------|--|--------|
| Full Birth Certificate (or name change certificate) | 70 | Mortgage documents confirming current address | 35 |
| Current Passport | 70 | Land Titles Office record confirming current address | 35 |
| Passport which has not been cancelled and was current within the | 70 | Bank or Credit Card statement confirming current address | 25 |
| preceding 2 years | | Department of Veterans' Affairs Health Care Card | 25 |
| Australian Citizenship Certificate | 70 | Medicare card | 25 |
| Diplomatic documents and official documents issued to refugees | 70 | Telephone account | 25 |
| Secondary identification | | Credit Card | 25 |
| Public Service ID including photograph and/or signature | 40 | Statement from a primary, secondary or tertiary education institution (attended with the last 10 years) confirming date of birth | 25 |
| Any licence issued under Australian law including photograph and/or signature, e.g. Driver licence | 40 | Membership records from a professional or trade association confirming date of birth | 25 |
| A Government issued ID showing entitlement to financial benefit including signature, e.g. Health Care Card issued by the | 40 | Records of a Public Utility confirming current address, e.g. gas, electricity or water bill | 25 |
| Department of Human Services | | Confirmation of enrolment issued by the Australian Electoral | 25 |
| ID card issued by a tertiary education institution including | 40 | Commission confirming current address | 25 |
| photograph and/or signature | | Victorian Proof of Age Card. Note: Key pass is unacceptable. | |
| Records from an employer (with past 2 years) confirming current | 35 | Rental agreement document confirming your tenancy of a property | 25 |
| address, e.g. letter on company letterhead or a payment summary | | Working with Children Check | 25 |
| Council rates notice confirming current address | 35 | | |

Note: Identification documents / photographs must be readable

This is an example of a secondary identification document that has been certified:



I certify that the document presented for certification is a true copy of the original. The document was sighted by me on

04/01/2020

| Signature: | g. Bloggs |
|------------------|-------------|
| Print name: | Jane Bloggs |
| Type of Referee: | Accountant |

Part 7 – Identification reference (continued) – list of Acceptable Referees

Identifying a Referee (You need to ask one of the persons from the following list to be your Referee.)

| A member of: the Chartered Accountants in Australia and New Zealand; the Australian Society of Accountants; or the Institute of Public Accountants. | A member of a municipal, city, town, district or shire council of a State or Territory. | An employee of a financial institution who is authorised by the financial institution to open accounts with the institution. |
|---|--|---|
| | | |
| An agent of a financial institution who is authorised by the financial instruction to open accounts with the institution. | A full-time employee of: a financial institution; or a corporation that is a registered corporation within the meaning of the <i>Financial Sector (Collection of Data) Act</i> 2001; who has been employed continuously for at least 5 years by one or more financial bodies. | An employee of a bank carrying on a business outside Australia: that does not have an authority under Section 9 of the <i>Banking Act 1959</i>; and that is engaged in a transaction with a cash dealer; who is authorised by the bank to open accounts with the bank. |
| A full-time employee of a company carrying on insurance business who has been employed continuously for at least 5 years by one or more companies of that type. | A legal practitioner of a Federal, State or Territory Court. | A registrar, clerk, sheriff or bailiff of a Federal, State or Territory Court. |
| An officer within the meaning of the <i>Defence Act 1903.</i> | An individual registered or licensed as: a dentist; a medical practitioner; a pharmacist; or a veterinary surgeon; under a law of a State or Territory providing for that registration or licensing. | An individual who is employed and registered as a nurse under the law of a State or Territory providing for that registration. |
| A diplomatic or consular officer of an Australian Embassy, High Commission or Consulate, in Australia or overseas. | A holder of an office established by a law of the Commonwealth, a State or Territory in respect of which annual salary is payable. | A judge or master of a Federal, State or Territory Court. |
| A stipendiary magistrate of the Commonwealth or of a State or Territory. | A justice of the peace of a State or Territory. | A member of the Federal Parliament or a State Parliament. |
| A member of the Legislative Assembly of the Australian Capital Territory, the Northern Territory or Norfolk Island. | A minister of religion who is registered as a marriage celebrant. | A notary public. |
| A member of the Australian Federal Police, or of the police force of a State or Territory, who in the normal course of his or her duties, is in charge of a police station. | A member of the Australian Federal Police, or of the police of a State or Territory, of or above the rank of sergeant. | A manager of a post office. |
| An individual employed as an officer or employee by one or more of the following: the Commonwealth, a State or Territory; an authority of the Commonwealth, a State or Territory; or a local government body of a State or Territory; who has been so employed continuously for a period of at least 5 years, whether or not the individual was employed for part of that period as an officer and for part as an employee. | An individual employed as a full-time teacher or as a principal at one or more of the following educational institutions: a primary or secondary school forming part of the eduction system in a State or Territory; or an institution listed in section 4 or paragraphs 34(4)(b)-(j) (inclusive) of the <i>Higher Education Funding Act 1988;</i> who has been so employed continuously for a period of at least 5 years. | An individual who, in relation to an Aboriginal community: is recognised by the members of the community to be a community elder; or if there is an elected Aboriginal council that represents the community – is an elected member of the council. |
| An individual who is an agent of a totalisator agency board if: the individual conducts an agency of the totalisator agency board at particular premises; and the agency is not ancillary to any other business conducted at those premises. | A Commissioner for oaths of a State or Territory. | An individual who is registered as a tax agent under part VIIA of the <i>Income Tax Assessment</i> <i>Act 1936.</i> |
| A member of the Chartered Institute of Company Secretaries in Australia Limited. | A member or fellow of the Association of Taxation and Management Accountants. | A member of the Institution of Engineers Australia, other than a member with the grade of student. |
| A fellow member of the National Tax and Accountants' Association Limited. | | |
| You must ask the acceptable referee to: | | |

- a) sign the copy of the identification documents that you are providing in order to indicate that it is a true copy of the original as demonstrated on the previous page; and
- b) complete all required parts of the 'Declaration by Referee' section in part 7 of the form as instructed on the form. Please note that this includes witnessing you (the applicant) signing the application in their presence.

Part 8 – Acknowledgement

You must read, sign and date the acknowledgement.