



**FORM 4B**  
**QUEENSLAND**  
*Weapons Act 1990*  
 Sections 24, 94 and 104



0006



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Ver. 2 — 07/04/09  
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- **CHANGE OF WEAPON(S) CATEGORY AND/OR**
- **CHANGE OF CONDITION(S) OF A LICENCE, PERMIT OR APPROVAL**

(NB—For this form, 'permit' refers to a Shooting Club/Range, Historical Society, Weapons Club and Shooting Gallery.)

### 1. NOMINATE CHANGE(S)

Place a cross  in applicable box(es).

Change of weapon(s) category

Change of condition(s) of a licence, permit or approval

### 2. LICENCE, PERMIT OR APPROVAL NUMBER(S) AFFECTED BY THIS CHANGE

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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### 3. LICENSEE/REPRESENTATIVE DETAILS

Property name/Lot on plan (RP no.) can be found on rates notice.

Family name

Given name(s)

Date of birth

*Day Month Year*

#### Residential address

Property name/Lot on plan

Street number and name

Suburb/Locality

State  Postcode

How long have you lived at this address?

*Years Months*

#### Postal address (if different from above)

Postal Address (e.g., PO Box)

Suburb/Locality

State  Postcode

#### Contact details

Home  Fax

Mobile  Work

Email

### 4. BUSINESS DETAILS (Complete this section only if applicable)

This section only applies if the applicant is a body e.g., a shooting club, organisation or gallery operator, security industry etc.

Registered business name

### 5. DETAILS OF CHANGE

Outline the details, including the reason(s) for the change(s) in the space provided. If insufficient space, complete further information on a blank page and attach to this form. You may also provide supporting documentation. Refer to specific requirements in Section 6 of this form.


## 6. SUPPORTING DOCUMENTATION

### Change of Weapons Category

**Licence holders**—Provide a 'Statement of Attainment' as proof of your successful completion of an approved course in safety training for weapons or approved training security licence (guard) issued within the last twelve months for the category of weapons you wish to change.

**Note:** This requirement includes collectors wishing to possess temporarily inoperable category H weapons.

**Permit/Approval holders**—Supporting documentation may not be required for an application for change(s) of weapons category for holders of permit(s) and/or approval(s), **unless** you are applying for category C shotgun use. If you are applying for category C shotgun, you **must** provide proof of affiliation with a national or international clay shooting competition.

### Change of condition(s)

#### Collectors of temporarily inoperable handguns—

- Provide a QP 0517 Approved Historical Society Declaration.

#### Collectors of temporarily inoperable modern collectable handguns—

- Provide a QP 0517 Approved Historical Society Declaration; **AND**
- Correspondence outlining your prolonged and genuine interest in the study, preservation or collection of firearms.

#### Sports or target shooting category H weapons greater than .38 calibre—

- Provide a letter on club letterhead stating that you are a current financial member of the club, and verifying that you have participated in specific accredited events.

**Other licence holders**—Supporting documentation for change of licence conditions may include a copy of your:

- Commercial Wildlife Harvesting licence; **OR**
- Certificate of Accreditation issued by Safefood Queensland.

**Permit or Approval holders**—Supporting documentation may not be required for an application for change(s) of conditions for holders of permit(s) and/or approval(s), including applications for additional weapons categories for shooting club permit, or shooting club range, or additional shooting matches for shooting range approval. Contact Weapons Licencing Branch on 3015 7777 for further assistance if required.

## 7. CERTIFICATION

I certify that the information I have given is true and correct in every detail and have attached all required documentation.

Signature of licensee/representative

Date     
Day Month Year

## 8. POLICE STATION USE ONLY

The necessary information has been completed and supporting documentation, where required, is attached.

Name of receiving station

Date     
Day Month Year

Police station receipt no.

Amount received \$  -

### Receiving member

Name

Rank and Reg. No./  
Level and payroll no.

Signature

Date     
Day Month Year

### Officer in Charge

Name

Rank and Reg. No.

Signature

Date     
Day Month Year

### Privacy Collection Statement

The collection of this information is authorised by the *Weapons Act 1990*. The information will be used for the administration and enforcement of the *Weapons Act 1990*. The QPS may disclose some or all of this information to other State and Federal Government agencies as provided for by legislation or in accordance with the *Information Privacy Act 2009*.