QUEENSLAND POLICE SERVICE
Weapons Act 1990
Section 27(1)

NOTICE OF SURRENDER OF LICENCE

QP 0463
05/13
Δ1

1. APPLICANT DETAILS

Family Name

Given Name(s)

Date of Birth — *Day* *Month* *Year*

Current Address

Property Name

Lot on Plan *(if known: Refer to Property Description on Rates Notice)*

Street number/ Street name

Suburb/Locality

State Postcode

Contact Details

Home Work

Mobile Fax

Email

I hereby surrender licence/s issued under the provisions of the *Weapons Act 1990.*

Please Note: Surrender of licence may also require disposal of any weapons kept under the authority of this licence.

Licence Number/s

Weapons disposed to *(tick option)* ☐ Individual ☐ Armourer ☐ Dealer ☐ Police Station

Licence no. Form 10 no./Audit no.

Reason for licence being surrendered *(tick option)*

☐ Revoked/Suspended ☐ DV ☐ No longer required ☐ Expired ☐ Other *(provide an explanation below)*

Applicant	**Receiving member**
Signature of applicant	*Signature and payroll number of CSO/Police Officer*

Surrendered at

Police Establishment

on *Day* *Month* *Year*

Police Station stamp

PRIVACY COLLECTION STATEMENT

The Queensland Police Service (QPS) is collecting your information for the purpose of processing this notice of surrender of licence. The collection of this information is authorised by the *Weapons Act 1990* (Qld). The information on this form will not be disclosed without your consent unless such use or disclosure is authorised or required by law, including the *Weapons Act 1990* (Qld), *Police Service Administration Act 1990* (Qld) and the *Information Privacy Act 2009* (Qld). You have a right to access personal information that the QPS holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling or your personal information, please contact the QPS Right to Information and Privacy by email rti@police.qld.gov.au or by telephone on 3364 4666.