

FORM 1

Queensland Weapons Act 1990 Section 13





APPLICATION FOR A LICENCE

Ver. 11 - 18/06/2020

Are you eligible for a Queensland Weapons Licence?

To be eligible for a weapons licence in Queensland you must:

- be at least 11 years old;
- have a genuine reason for needing a weapons licence in Queensland;
- · reside only in Queensland;
- be a fit and proper person;
- · have completed an approved safety course in weapons safety; and
- · have a safe and secure place to store a weapon.

You will not be considered a fit and proper person in Queensland if you have been convicted, or discharged from custody on sentence, in the last 5 years of any of the following:

- offences relating to the misuse of drugs;
- offences involving the use or threatened use of violence; and
- offences involving the use, carriage, discharge or possession of a weapon. Or if you have been named as a respondent in a domestic violence order.

When deciding to grant a weapons licence, we also consider the following for whether you are a fit and proper person in Queensland:

- · your mental and physical fitness;
- whether you have provided anything false or misleading on/with your application:
- criminal intelligence or other information about you; and
- the public interest.

1. Personal details (Full legal name)

Surname

Given name/s (incl. Middle name)

Former name (if any)

Town/Country of birth

Date of birth Drivers licence number

Are you an Australian citizen?

No

2. Contact details (Please note: only Australian addresses will be accepted)

Yes

Residential address

Postcode

Postal address (if same as residential address, write 'as above')

Postcode

Weapons storage address

Postcode

Mobile number Home number Work number

Email address

3. Business details (Only complete if this application is for a business)

Registered business name

ABN

Business address

Business postal address (if same as business address, write 'as above')

Postcode

Business phone number

Business email

4. Do I need to do a Safety Training Course?

A weapons licence may only be issued to an individual who has adequate knowledge of safety practices for the use, storage and maintenance of a weapon, or category of weapon, the possession of which is to be authorised by a licence.

Please tick the scenario that suits your situation

You must supply with this application:

a Statement of Attainment issued by a Registered Training Organisation (RTO) for an Approved Safety Training Course completed within the previous 12-month period. Go to Question 6 for Offence and licence history.

be the holder of a current licence from interstate or overseas authorising you for the category of weapon on this application. Go to Question ${\bf 5}$ for Weapons licence history for Safety Training Course.

be the holder of a Collector's Licence (Weapons), Concealable Firearms Licence, Firearms Licence or Minor's Licence that is current or within 12 months of expiry with the same categories. Go to Question 5 for Weapons licence history for Safety Training Course.

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No

6. Offence and licence history

You must report any offence history or licence history.

This includes any history in Queensland OR elsewhere.

Have you ever been involved with or affected by one of the following?

Check each statement:

	Yes	No
Respondent in a Domestic Violence Order (regardless of the outcome)		
Charged or fined with an offence (traffic and/or criminal)		
Subject to a firearms prohibition/exclusion order		
Refused a licence or authority for a firearm or weapon		
Had a licence or authority for a firearm/weapon surrendered, cancelled, disqualified, suspended or revoked		

If you answered 'Yes' above, you must provide a letter explaining your history and why you are fit and proper to possess a weapons licence as per 'Are you eligible for Queensland Weapons Licence?'

7. Medical History

You must report any medical history or ongoing condition you have. Have you ever suffered from any of the following conditions?

Check each statement:

	Yes	No
Serious eye or vision impairments		
Any condition causing seizures, dizziness or blackouts		
Brain injury or neurological condition		
Psychiatric disorder, psychological or emotional problem		
Alcohol or drug related problems/dependency		
Physical impairment		
Other serious health diagnosis (e.g. diabetes, acute sleep disorder, heart disease, oncology or if you have a medical condition imposed on your driver licence)		

If you answered 'Yes' above, you must provide a letter explaining your history and why you are fit and proper to possess a weapons licence. You must also supply a report from your doctor/psychologist/psychiatrist addressing the following:

- a) The history taken from you;
- b) Sufficient details of any health condition;
- c) The period of time you have been treated by the practitioner; and
- d) The practitioner's opinion in relation to your fitness and propriety to possess/use firearms and the reason for that opinion.

8. New licence details

a. Is this for individual or business purposes? Individual

b. Licence type

Your primary genuine reason

Provide additional genuine reasons if applicable

d. Weapon categories

e. How many years are you applying for?

9. Genuine reason address (Complete this section if you are applying for any rural, recreational or occupational activities)

Lot

Postcode

If you are not the landowner or manager of the property, you will need to provide certification that you have authority to use the property from the landowner or manager in Question 13.

11. Primary Production or Rural Employee details

12. Group Licence details

10. Weapons for registration (if applicable)

Category A C E M R Make Model

Serial number

Action Cartridge Mag. capacity Barrel Length (mm) Weapon Length (mm) handguns only handguns only Е D C M R Category

Make Model

Serial number

Cartridge Action Mag. capacity Barrel Length (mm) Weapon Length (mm) handguns only handguns only Category \mathbf{C} D E M R Model Make

Serial number

Cartridge Mag. capacity Action Weapon Length (mm) Barrel Length (mm) handguns only handguns only

If you have more than 3 weapons to be included with this application, please provide these details with your proof of registration for these weapons.

13. Landowner signature

Name

Signature

Applicant signature

I certify that the information I have given is true and correct in every detail and understand that it is an offence to state anything in a document kept, given or made under the Weapons Act 1990 that a person knows is false or misleading. I authorise the Queensland Police Service to contact me in regards to my application if required, including to verify my genuine reason for the licence and/ or my genuine need for the firearm.

Date

I certify that I have read the website and understand what supporting documents I need to supply to Australia Post, along with my proof of identity documents when I lodge this application.

Name

Signature Date

The Queensland Police Service (QPS) (or Australia Post as an agent for the QPS where applicable) is collecting your information for the purpose of processing your application for a New Licence Application, including Australia Post's verification of your identity. The collection of this information is authorised by the Weapons Act 1990 (Qld). The information you provide will not be used or 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). Information on how to access and/or amend your personal information or make a privacy related complaint is available on the Queensland Police Service website at www.police.qld.gov.au/rights-information/privacy-qps and the Australia Post Group Privacy statement at www.auspost.com.au/privacy.

Australia Post Office Locator: https://auspost.com.au/locate/qld-weapons-licensing

Supporting Information: https://www.police.qld.gov.au/units/weapons-licensing