FIREARM LICENSING AUTHORITY

Instructions for Completion of Application Form for Firearm User's Licence & Firearm User's Restricted Licence



- 1. Applicant **must be 21 years old and over** to apply.
- 2. A single application form (FLA204) must be completed and signed by the applicant. Application forms may be downloaded from the Authority's website (<u>www.fla.gov.jm</u>) or collected at any of our offices.
- The following supporting documents are required for *Firearm User's Licence and or a Firearm User's Restricted Licence:*

A. Two (2) Passport sized photographs:

- One (1) certified by a Justice of the Peace. NB: This should bear J.P's registration number, signature & date. Photographs are to be taken against a white background. (**Do not seal photos**)
- B. Two (2) recommendations from any of the following categories of persons:
 - ✓ Minister of Religion (must be a
 - Marriage Officer);
 - ✓ Justice of the Peace;
 - ✓ School Principal;
 - ✓ Gazetted Rank Police Officer (not below the rank of Deputy Superintendent);
- ✓ Attorney-at-Law or Resident Magistrate;
- Medical Doctor;
- ✓ Member of the J.D.F (not below the rank of Major); and
- ✓ Member of Parliament.

Recommendations are to be addressed to the Firearm Licensing Authority and <u>MUST</u> state the applicant's address, the number of years the referee has known the applicant (not less than 5 years), as well as a reference to the applicant's character. Recommendations and Authorization Letters are valid for 6 months

- C. Birth Certificate. (Original and Photocopy).
 - Proof of name change if name has been changed: (Marriage certificate, Deed poll, Divorce Decree)
- D. Valid Government issued ID (Passport, Driver's Licence or Voter's ID). (Original and Photocopy).
- E. **Proof of Income** (Original and Photocopy):
 - Employed persons-Pay Slip or Job Verification Letter from employer (Last 3 months or letter not older than 3 months. Applicants paid fortnightly should submit last 6 payslips). Letter Must be addressed to the FLA
 - ✓ Self-employed persons/ Business owners- a valid Business or Individual Tax Compliance Certificate (TCC), Business Registration Certificate is required where the applicant is a business i.e. a Company, Sole Trader or Partnership.
- F. Purchase Fingerprint Receipt:
 - ✓ Purchase fingerprint receipt at the tax office, then visit the Criminal Records Office to complete fingerprint process. Upon completion, the original fingerprint receipt MUST accompany the application package. (Applicable only if the applicant has not been manually fingerprinted within the last five years).
- G. Justification Letter stating the Reason(s) for the application.
- H. Members of the Jamaica Constabulary Force and Jamaica Defence Force are to submit a letter of recommendation from their commanding officer (Enclosed in a sealed envelope).
- I. **Members of the Department of Correctional Services** are to submit a letter of recommendation from the Superintendent in charge (**Enclosed in a sealed envelope**).

Other Information:

- Application Form(s) and supporting documents are to be submitted directly to the Firearm Licensing Authority (FLA), at any of our offices. ONLY COMPLETE APPLICATION PACKAGES WILL BE ACCEPTED.
- An application fee payable at any of the FLA offices is required upon submission of application. Debit Card, Credit Card and cash transactions are accepted.
- The date of the interview will be scheduled for up to the 10th working day (excluding weekends and public holidays) after receipt of the application by the FLA.

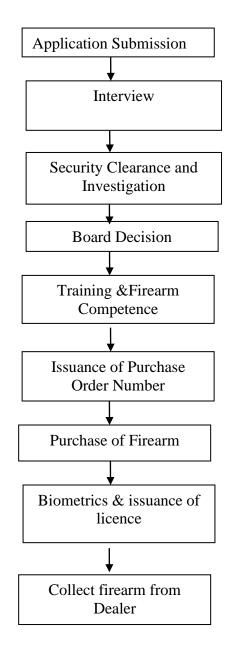
For further enquiries please contact us at:

Headquarters 91A Old Hope Road, Kingston 6, Jamaica, W.I. Tele: (876) 927-5159 - 60 / 927-6057 - 59 Montego Bay Regional Office Shop #9, Bogue City Centre Bogue, Montego Bay, St. James Tele: (876) 978-0245 Mandeville Regional Office Shop G15, James Warehouse Plaza Mandeville, Manchester Tele: (876) 927-6073 / (876) 927-6075 (876) 618-0487 (Digicel) St. Ann Regional Office Lot 60, Dairy Road Discovery Bay, St. Ann Tele: Flow- 876-670-0812 Digicel- 876-618-2920-21

Firearm Application Process

To be successful, an application must pass through the following stages:

Flowchart for Firearm User's Licence and or Firearm User's Restricted Licence



FLA-204

FIREARM LICENSING AUTHORITY



Application for Firearm User's Licence

To Be Completed BLOCK LETTERS

Section A PERSONAL						
Application Type- New , Replacement: Defective , Non-Defective , Stolen , Lost					Photograph of Applicant	
Applicant's Name-Last Name, First Name, Middle Name Mr. Mrs. Ms. Other Please state:						•
Other names (Nickname, alias, pet name)						
Date of Birth Age Gender Male Female			emale 🗆	Place a	nd Parish of Birth (H	ospital/Home, Clinic)
Nationality	y	_	Marital Status		Email Address	
Home Telephone No.			Mobile Telephone No. Business Telephon		e No. (including Ext.)	
			Next Of Kin Info			
Name-Last name, First Name, Middle Name Mr. Mrs. Ms.			Occ	upation		
Email		Home Telephone No.	Mot	ile	Business Telephone No.(including extension)	
Referees (Must not be the person who wrote the recommendation						
Name-Last name, First Name, Middle Name Mr. Mrs. Ms.					upation	
Email			Home Telephone No.	Mob	ile	Business Telephone No.(including extension)
Name-Last name, First Name, Middle Name Mr. Mrs. Ms.			Occ	upation		
Email			Home Telephone No.	Mob	ile	Business Telephone No.(including extension)

Section B

Section B	
Tax Registration No. (TRN)	I.D Type and Number(Driver's Licence, Passport, National ID)

Section C

Section C				
Present Address of Residence	Country	Parish	City/Town	Period of Residence (e.g. 1987-Present)
				,

Previous Address of Residence	Country	Parish	City/Town	Period of Residence (e.g.1943-1987)

Section D

Name and Address of Present Business/Employer	Date/Time Period e.g. (2000-Present)	Occupation
Name and Address of Previous Business/Employer	Date/Time Period e.g.(1999-2000)	Occupation

"WARNING:IT IS AN OFFENCE TO KNOWINGLY MAKE A FALSE DECLARATION ON THIS APPLICATION AND THIS MAY RESULT IN THE DENIAL AND/OR REVOCATION OF YOUR APPLICATION AND/OR AUTHORISATION.

Section E

If yes, state period[6], name of organisation[6], location[6] and nature of employment in the space below. If yes, state address of last residence in the space below (if exceeds more than six months) Section P State Type and Calibre of Firearm(s)for which the application is being made Nearest Police Station to Place of Residence If yes, complete the section below. If yes, state reason: Has any previous Firearm Authorisation previously issued to you been recoded, cancelled, suspended, or surrendered? If yes, give details: Have you or any member of your household ever been detained by police, arrested, charged and/or convicted of a criminal offen locally or abread? Yes No I <th>If yes, state period(s), name of organisation(s), location(s) and nature of employment in the space below. If yes, state address of last residence in the space below (if exceeds more than six months) Section F State Type and Calibre of Firearm(s)for which the application is being made Nearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of State Place Nearest Police State Reason: Rearest Police Rearest Police State Reason: Rearest Police State Reason: Rearest Police Place Plac</th> <th>Have you ever lived or worked outside of Jamaica? Yes</th> <th></th>	If yes, state period(s), name of organisation(s), location(s) and nature of employment in the space below. If yes, state address of last residence in the space below (if exceeds more than six months) Section F State Type and Calibre of Firearm(s)for which the application is being made Nearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of Employment/Business Rearest Police Station to Place of Residence Nearest Police Station to Place of State Place Nearest Police State Reason: Rearest Police Rearest Police State Reason: Rearest Police State Reason: Rearest Police Place Plac	Have you ever lived or worked outside of Jamaica? Yes	
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"WARNING:IT IS AN OFFENCE TO KNOWINGLY MAKE A FALSE DECLARATION ON THIS APPLICATION AND THIS MAY RESULT IN THE DENIAL AND/OR REVOCATION OF YOUR APPLICATION AND/OR AUTHORISATION. FLA-204

Section I (Please read and indicate your agreement to each statement by ticking the boxes)

- □ I consent to be fingerprinted and consent that such prints may be used to facilitate background security checks.
- □ I am aware that this application may be discarded should I fail to complete the processes as required by the Authority.

Declaration of Truth

I certify that the information provided on this application is true to the best of my knowledge, information and belief.

Applicant's Signature _____ Date _____

Section J

For Official Use Only	
Date of Interview:	Method of submission:
Fees paid:	Tax receipt number:
Name of Interviewing Officer:	Signature of Interviewing Officer:

"WARNING:IT IS AN OFFENCE TO KNOWINGLY MAKE A FALSE DECLARATION ON THIS APPLICATION AND THIS MAY RESULT IN THE DENIAL AND/OR REVOCATION OF YOUR APPLICATION AND/OR AUTHORISATION.

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