

FIREARMS (PROHIBITION, RESTRICTION AND REGULATION) ACT APPLICATION FOR FIREARM/ AMMUNITION IMPORT PERMIT						Date Received:		
						Please indicate <input type="checkbox"/> FIREARM <input checked="" type="checkbox"/> AMMUNITION <input type="checkbox"/> ACCESSORIES		
						CONTROL No.		
Section 57 (1)(a)								
IMPORTER								
NAME/COMPANY: Firearm Licensing Authority				REPRESENTATIVE NAME: John Joe				
ADDRESS: 91 A Old Hope Road, Kingston 6				POSITION: Dealer		CITIZENSHIP: Jamaican		
NUMBER TELEPHONE: 876-223-4572		FACSIMILE:		E-MAIL: Johnjoe@yahoo.com		SIGNATURE:		
						DATE: February 7, 2023		
State your reason(s) for application of Import Permit		This application is for purpose of importing ammunition to Jamaica to sell to licensed firearm holders.						
EXPORTER								
NAME/COMPANY: Miami Police Depot				REPRESENTATIVE				
ADDRESS: 1040 East, 49th Street, Hialeah, Florida, 33013				NAME : Paul Jones				
NUMBER TELEPHONE: 954 - 0000- 000		FAX:		E-MAIL: Pauljones@gmail.com		POSITION: President		
						CITIZENSHIP: American		
DESCRIPTION								
QTY.	TYPE / MAKE / MODEL	CALIBRE	Manufacturer			LENGTH		SERIAL No.
			Country	Name	Date	BARREL	OVERALL	
12,000	n/A	12 gauge-	Buck shot		n/a	N/A	N/A	N/A
1,000		12 gauge-	slug					
500		9mm	Hollow point					
1000		9mm	Ball Point					

"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.