



RESTRICTED

APPLICATION FOR AN OCCASIONAL PERMIT

(Art. 35 of the Firearms (NI) Order 2004)

FD No. (_____)

This form is for an occasional permit to deal in firearms and ammunition at a place away from your registered place of business. It must be completed at least 14 days before the permit is required. Please complete in BLOCK CAPITALS.

Name: _____

Trading as: _____

Home/Business _____

Address: _____

Expiry Date of Dealer's Certificate: _____

Name of Event: _____

I seek authorisation to deal in arms and ammunition at: (location)	On the following dates:

All firearms and ammunition in which you wish to deal must be listed overleaf.

Indicate the security arrangements for the firearms and ammunition during conveyance to and from the temporary place of business.

Indicate the security arrangements for the storage of the firearms and ammunition at the temporary place of business.

Signature: _____ Date: _____

When fully completed please send this form to:

Police Service of Northern Ireland, Room 46 Lisnasharragh, 42 Montgomery Road, Belfast BT6 9LD

