													Form	n Tra	acki	ng l	D _					╧			╧		
	AP	PLI(		ΓΙΟ	Ν	FO	R	G	RA	٨N	Т	0	F	Α	R	M	S	LI(	CE	IN	S	Ε					
			N	1inist	ry o	of In	teri	or,	Go	ve	rnn	ner	nt c	of F	Pał	kist	an							¥.	<u> </u>		
Applicant rece																							1 Martin	Č	)	N.	7
photo	1	Туре с	of Wea	pon ap	plied	for	Pis	stol [	_ R	evol	ver	s	Shotg	Jun		Rifle		Kalas	shnił	<ov< td=""><td></td><td>S.</td><td></td><td></td><td>X</td><td>W.</td><td>6</td></ov<>		S.			X	W.	6
De petuse Din er et	2	Reaso	on For	Need C	Of Arn	ns Lie	cense	• 🗌	Spo	rts	- F	Prote	ectio	n 🗌	Di	ispla	у					×.			lith		
Do not use Pin or st	·   _		her																			a com			A R		P)
1" x 1"	3		cation 1 ansfer/l	<u>_</u>			Dupl valid							atis	arsic	'n						E					1
Applicant's F	irst Name			linenta			vanua	ation		lanu		Cent	50/00	51176	51510	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								0			
4																										Τ	
Applicant's L	ast Name									_																	
5																											
Applicant's N	ame to be or	n the Ar	ms Lic	ense										nnli	loon	*~ C	onto	act No		1	ГТ	<u> </u>				<u> </u>	
6 Applicant's C						)ate o	f Birt	<u>h (Г</u>		MYY				ende		isc	onta										
7					8				1		ΓÍ		9		/ale		Fe	male									
Father's Nam	e – – –						· ·					-		_													
10																											
Current Maili	ng Address																										
11 City / Village				Distr	ict						T/	ehsil								Post	al / 1	Zin	Code				
Police Station				Disti									istri	ct									0000				
12												13			Τ									Τ		Τ	
Permanent A	ddress																				<u> </u>						
14 City / Village				Distr	ict						Te	ehsil								Post	al / 2	Zip (	Code	;			
Police Station									1			ם 16	istri	ct	1					1				—		T	
Profession / 0	Occupation														_											_	
17																											
Do You Claim	Exemption	From Th	ne Pay	ment C	Of Lice	ense	Fee?		Ye	s [		lo	(lf	yes	give	e rea	ason	s)									
18																											
Weapon Calib	er/Bore	Car	rtridge	S	W	eapo	n No																				
19		20			21																						
22 Do you alrea	dy possess a	a weapo	n?	Yes		No	(if y	ves, p	olease	e atta	ach c	opie	s of	all li	cens	se / li	nforn	nation	of ti	he w	eapo	ons v	with t	his f	orm)	į	
Old License	No.				_		D Ap	pro\	/al R	efer	renc	e					-			_							
23						24										Boo	klot	No./C	)ard	No							
	ch copies of all ance of Old				f the v te of l									27			NICL				<u> </u>	Τ					
25				26										_			3(	DC			 Oliti	 ical		nt Ir		mati	
Last Renew	al Date of OI	d Licen	se	Val	idity	Date	of Ol	d Lie	cens	е				Seu	istra	ation	n No										
28			2	29										wy					<u> </u>		+	+	+		<u> </u>	<u> </u>	
<u>Weapon R</u>	<u>etainer's lı</u>	nforma	ation (	(Please	fill Blu	ue Caj	ption	incas	se of	Rene	ewal/	Con	versi	on/F	Re-va	alida						<u> </u>	<u> </u>	<u> </u>	<u> </u>		]
Retainer's Fir	st Name													_			Dat	e			$\square$	╧	<u> </u>	<u> </u>	Ļ		
31																											
Retainer's La	St Name																					$\neg$		$\neg$	$\top$	$\top$	
Retainer's CN					D	ate o	of Birt	h ( C		MYY	YY)		Ge	ende	ər												
33					34			ĺ				3	35	N	1ale		Fe	male									
Retainer's Fa	ther Name													Т						1	ГТ						
36 Permanent A	dress																										
37 City / Village						Dist	rict											Tehsi									
38 I hereby dec				ents ar	e true	e to th	ne be	st of	my	kno	wled	lge a	and	beli	ef a	nd t	hat f	urnis	hing	g fal	se ir	nfoi	rmat	ion v	will	resu	It in
summary re	•	applica	ition				A (																		- 4 - 1		
39 Applicant's S	Ignature						40		Applio	canť	's Le	tt Th	numb	)										Re	ph	r's rec noto e here	
																								Don		Pin or:	
																								2011		x 1"	
																										A 1	
Official Use (	Comments)																				_F		Appro			Not A	pproved
																						'	-hhio				ignature
41																								Uniti	J. 96		.ອາເລເບເອ

## **INSTRUCTIONS:**

All columns should be filled in English using capital letters only.

Thumb Impression and signature should not exceed out of rectangle allocated for it.

\*If space provided for certain field is not enough than write below the allocated space.

\*Paste one photograph of applicant on the form and attach one with application form.

If weapon retainer is different form the applicant then paste one photograph of retainer on the form.

All photographs should have blue background and clearly written name and CNIC number of the applicant on back side of photograph.

Name of Applicant to be printed on the card should not exceed from 25 characters including space

Applicant's Father Name should not exceed from 27 characters including space

•Columns No.6,7,10,11,19,20,21 are mandatory

+Columns No.23to30 are mandatory for Renewal/Conversion application.

المصرف انگریزی کے بڑے حروف سے پر کریں۔ الکو ٹھے کا نشان اور دستخط دیئے گئے جاشیے سے ماہر نہ جائے۔ ایک تصویر فارم پر چسپاں کریں اور دوسری ساتھ لگا نئیں۔ اگردرخواست دہندہ خود Retainer نہیں ہے تو Retainer کی ایک تصویر فارم پر چسیاں کریں۔ ار تمام تصاویر ینلے بیک گراؤنڈ کے ساتھ ہونی جامیں اور تصویر کی پشت پر نام اور CNIC نمبر واضح درج کریں۔ ارخواست د ہندہ کا نام جو کہ کارڈ پریزن ہو گا25 حروف سے ذیادہ نہ ہو۔ ارخواست دہندہ کے والد کانام 27 حروف سے ذیادہ نہ ہو۔ الم نبر 6,7,10,11,19,20,21 لازمى پركري- 🛠 Renewal/Conversion کرانے والوں کے لیئے کالم نمبر 23 تا 30 پر کرنالازم ہے۔

Please make sure to attach following documents with the form/s otherwise application will not be entertained.

	IN CASE OF NEW LICENSE
1	Copy of CNIC
2	Two recent passport size photographs
3	Certificate of Profession / Service
	DUPLICATE
1	Application
2	Copy of FIR
3	Affidavit
4	Copy of CNIC
5	DCO / DC /PA Report
	TRANSFER / INHERITANCE
1	TRANSFER / INHERITANCE Application
1	
	Application
2	Application Death Certificate
2	Application Death Certificate Affidavit form all legal heir with copies of CNIC
2 3 4	Application Death Certificate Affidavit form all legal heir with copies of CNIC Bank Certificate
2 3 4	Application Death Certificate Affidavit form all legal heir with copies of CNIC Bank Certificate DCO / DC /PA Report
2 3 4 5	Application Death Certificate Affidavit form all legal heir with copies of CNIC Bank Certificate DCO / DC /PA Report Renewal /Re-validation/Conversion

**Note: -** Arms License Section has the right to reject the attached documents if not found upto the required standard's.

Web Address http://www.interior.gov.pk