



Application No.
(For Official Use Only)

HONG KONG POLICE FORCE
Firearms and Ammunition Ordinance (Cap. 238)

User Application for Exemption (other than deactivated firearms for self collection)

Before completing this form, please read the 'Information Notes'

This application is for - (Please "✓" as appropriate)

- modified firearms for TV/Film shooting
- starting pistols for sport
- sport and competition
- others (please specify _____)

Part I : Particulars of the applicant

Name in full : _____
(English) (Chinese)

Type of Identity Document and No./ HKID Card No. : _____

Chinese Commercial Code : _____ / _____ / _____ Nationality : _____

Date of Birth : _____ Male Female

Place of Birth : _____ Occupation : _____

Residential Address : _____

Tel. No. : _____ (Office) _____ (Home) _____ (Mobile) Fax No. : _____

Records of illness and criminal conviction

Have you ever attempted to commit suicide, or suffered from any illness, including mental disorder, which may affect your capability in controlling the arms?

- No Yes (please provide details)

Have you ever been convicted of a criminal offence in Hong Kong or elsewhere?

- No Yes (please give full details at below, use plain paper if insufficient space)

Date of conviction	Offence	Sentence	Venue of trial (including country)

Part II : Use of the Subject Arms and Ammunition

Name of production / activity :

Name of Organizer (Name of company / organization) :

Part III : Authorization and Declaration of the Applicant

I DECLARE that the information and particulars submitted by me in support of this application are, to the best of my knowledge and belief, true, correct and complete. I understand that section 47 of the Firearms and Ammunition Ordinance, (Cap. 238) states that any person who makes any statement which he knows to be false or misleading, or recklessly makes any statement which is false, in a material particular for the purpose of procuring, whether for himself or another, the grant, renewal or amendment of a licence, or the grant of an exemption commits an offence and is liable to imprisonment for 2 years.

I hereby authorize the Commissioner of Police, or his representative, to release full particulars of any and all criminal convictions recorded against me to Police Licensing Office, and to obtain information and/or to inquire into any and all my personal data (including my medical reports, etc) from any third party for the purpose of investigation into and/or enforcing any matters relating to my application/licence/exemption.

I also agree that the personal data provided by means of this form will be used by the Commissioner of Police for processing applications/updating record/conducting all kinds of present and subsequent investigations/enforcing licensing conditions in connection with licences/exemption under the Firearms and Ammunition Ordinance (Cap. 238).

- I shall collect the Exemption personally upon issue.
- I authorize the representative of (name of company/organisation) _____
_____ to collect on my behalf the Exemption upon issue.

Signature of the Applicant

Official chop of the Company / Organisation
(where applicable)

Name of the Applicant (in BLOCK Letter)

Date

Position held