Bureau of Alcohol, Tobacco, Firearms and Explosives

Application for Federal Firearms License

For ATF	Use Only												
		or Corporation (If part	nership, include na	ime of	each partne	r)							
			-	_									
2. Trade	or Busines	s Name, if any						umber (EIN#) or SN is Voluntary)		Name of Cour Business is Lo		ich	
		s (RFD or street numb The business address (6. Mailing	Address (If a	liffere	nt from address i	in item	#5)			
7 Contac	y Mumbar	s (Include Area Code)											
		s (inciuae Area Coae)			F M 1								
Business I	none				Fax Number	·							
Cell Phone					24 Hour Em	ergency # (I)	f differ	rent)					
8. Applic		ness is (Select one) Individually Owned	A Partnership	р	A Corpor	ation	Oth	ner <i>(Specify)</i>					
		Activity Applicant is a (Sale of ammunition				Which Requ	ires a	Federal		o You Intend usiness as a P Yes			
		Made For a License Ur Licenses are issued f							ubmit t	he fee noted i	ext to the	e box	x with
Type			D	escrip	tion of Licer	ise Type						Fee	e
01/02), Including Pawnbrol Gunsmith activities a					ces (Ir	ncludes: Rifles, S	hotgun	s, Pistols,	\$200		
06	Manufacti	irer of Ammunition fo	r Firearms Other T	han A	mmunition f	or Destructiv	e Dev	vices or Armor Pi	iercing	Ammunition	\$30		$\overline{}$
07	Manufacti	irer of Firearms Other	Than Destructive l	Device	es						\$150		
08		of Firearms Other Than on Other Than Armor									\$150		
09	Dealer in	Destructive Devices									\$300)	
10	Manufacti	irer of Destructive De	vices, Ammunition	for D	estructive De	evices or Arr	nor Pi	ercing Ammunit	ion		\$300) [
11	Importer of	of Destructive Devices	, Ammunition for I	Destru	ctive Device	s or Armor F	iercin	g Ammunition (S	See ins	truction #8)	\$300) [
										Total Fees \$			
	od of Pay ck (Enclos	ment (Check one) ed) Cashier's (Check or der (Enclosed)		Visa	Mastercar	d	American Express		Discover [Dine	ers C	Club
Credit/De	bit Card N	umber (No dashes)	(Silvingson)		Name as Prir	nted on Your	Credi	t/Debit Čard		Expiration I	Date (Mo	nth c	& year)
Credit/De	hit Card	Address:								L			
Billing Ad		City:			State:				Zip (Code:			
Please Co	mplete to	Ensure Payment is Cre	edited to the Correc	t App	lication:								
I am Payii	ng the App	lication Fee for the Fo	ollowing Person, Co	orpora	tion, or Partr	nership:			Total	Application	Fees:		
I Authoriz	ze ATF to	Charge my Credit/Deb	oit Card the Above	Amou	nt.				*				
		Signature of Car	dholder							Date	;		

Your credit/debit card will be charged the above stated amount upon receipt of your application. The charge will be reflected on your credit/debit card statement. In the event a license/permit is NOT issued, the above amount will be credited to the credit/debit card noted above.

13. Hour	s or Ope	ration of Applic	ant's Business (M	iusi de co	тріегеа)				14. Is Applicant Presently Engage		
Time	Sun	Mon Mon	Tues	Wed	Thu	Fri		Sat	Requiring a Federal Firearms answer 14a.)	Licens	e? (If "Yes,"
Open									Yes	□ N	lo
									14a. Present Federal Firearms Lic	ense N	lumber
Close											
			rmed Forces, Prov d Military Brancl		rvice Serial Nu	ımber	•	•	Military Branch		
16. Appl	icant's B	Business Premise	es Are				17.	Indicate Ty	rpe of Business Premises		
Own	ned	Le	ased/Rented		Military			Zoned	Zoned		
			ASE PROVIDE T		ME, ADDRESS	S, AND		Commercia			D 11:
			E PROPERTY O wner (If applicable				-	Store		_	Dwelling
rvanic and	i Addics	is of Froperty O	wher (ij applicable	(6)				Office			n/Apartment
									& Gun Club Hotel/I		
									ry Base Public	Housin	ng
								Other	(Specify)		
Telephon	e Numbe	er of Property O	wner (If applicab	le)							
							1		ISES ARE LOCATED ON A MII ON, ATTACH A COPY OF WRIT		Y
18. Do Y	ou Inter	nd To Make a Pr	ofit from Your B	usiness?			AU	THORIZA	TION FROM THE BASE COMM	ANDE	
	Yes		No (If no, do not	submit a	pplication)			NDUCT A STALLATIO	FIREARMS BUSINESS ON THE ON.	E MILI	IAKY
18a. Do	You Inte	end To Sell Firea	arms Only at Gun	Shows?			19.		tend to Use Your License Only to	Acquii	re Personal
	Yes (If y	ves, do not subm	it application)		No No			Firearms? Yes (If v	ves, do not submit application.)		No
			If Business wa	s Obtain	ed From Some	one Else	, Pro		llowing Information.		
20. Name	e of Prev	vious Business					21.	Federal Fir	rearms License Number		
									Persons in the Business. See Instr		
									g., "Mary Alice (Smith) Jones," Not t Complete All Information in th		
	(-5 11.		,		ountry of						
		Position and	Home Address	C	itizenship	Place Birt			Dans and Ethnisites		
Full Na		Social Security Number	Please provide		nore than one, applicable.	(Cita		Date of	Race and Ethnicity	Sov	Residence
Full IN	ame (Social Security Number is	every address yo have had in the		nimmigrant must complete	(City State,		Birth	(Please check one or more boxes)	Sex	Telephone No.
		Voluntary)	last 5 years.		musi complete iformation in	Foreig Count			Or more boxes)		
				i	tem #23.	Count	'				
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific Islander		
									White		
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific		
									White		

Full Nam	e Soci	sition and ial Security Number cial Security Iumber is Soluntary)	Home Address Please provide every address you have had in the last 5 years.	Country of Citizenship List more than one, if applicable. Nonimmigrant aliens must complete all information in item #23.	Place of Birth (City, State, or Foreign Country)	Date of Birth	(Ple	e and Ethnicity case check one more boxes)	Sex	Residence Telephone No.
							American	Indian or Alaska Native		
							Asian			
							Black or A	African American		
							Hispanic	or Latino		
							Native Ha	waiian or Other Pacific		
							White			
							American	Indian or Alaska Native		
							Asian			
								African American		
							Hispanic			
							Native Ha	waiian or Other Pacific		
							☐ Islander ☐ White			
22 Nonime	niarant A	lian Cartifia	ation of Compliana	e With 18 U.S.C. 922	(a)(5)(D) If	additional an		ad usa a samarata sha		
commerce.	All nonir		ens listed in item 22	to receive any firearm 2 must complete the fo	ollowing info	rmation certi		liance with 18 U.S.C.	922(g)	(5)(B).
						First:		Middle	miliar	:
				ued Alien Number or a or permit lawfully issu		,	iously INS I	Number):		
1. If you	ı answere	ed "NO," you	ı likely cannot lawf	fully possess a firearm ag information, and at	and therefor	e cannot be a	Federal fire		No	
	Hunti	ing License o	or Permit Number, i	f any	State of l	Issuance		Expiration Date	, if any	
Give Full D	etails on	a Separate	Sheet for All "Yes	" Answers in Items 2	24 and 25.				Yes	No
24. Has Ap			ederal Firearms Lic							
or any I Referre	d to in		nied a Federal Firea							
Item 22	1100,0			ation Holding a Feder		License?				
				eral Firearms License	e? 					
22.1.1			deral Firearms Lice				0.1			
25. Is Appleany Per		Judge Could Imprison You for More Than One Year?								
Named 22 Abo	I	B. A Fugiti	ve from Justice?							
22 A00	ve.	C. An Alier	Who is Illegally o	r Unlawfully in the Un	nited States?					
		D. Under 2	1 Years of Age?							
			wful User of, or Ad ntrolled Substance?	dicted to, Marijuana,	or any Depre	ssant, Stimul	ant or Narco	otic Drug, or any		
			o a Court Order Res Partner or Child or	straining Him/Her from Such Partner?	m Harassing,	Stalking, or	Threatening	g his/her child or an		

Give Full Details of	n a Separate Sheet for All "Yes" Answers in Item 26.		Yes	No
26. Has Applicant or any Person	A. Been Convicted in any Court of a Felony, or any other crime for which the Jud You for More Than One Year, Even if You Received a Shorter Sentence, Inclu			
Named in Item 22 Ever:	B. Been Discharged from the Armed Forces Under Dishonorable Conditions?			
ZZ EVCI.	C. Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudic Manage Your Own Affairs, or Been Committed to any Mental Institution?	cated Incompetent to		
	D. Renounced United States Citizenship?			
	E. Been Convicted in any Court of a Misdemeanor Crime of Domestic Violence?	(See definition #3)		
² You may answer	a formal accusation of crime made by a prosecuting attorney, as distinguished from a NO if (a) you have been pardoned for the crime or (b) the conviction has been expute are not prohibited from possessing or receiving any firearms under the law where	nged or set aside or (c) your		nave been
27. Applicant Cert	tification (Please read and initial each box)			
	ness to be conducted under the Federal Firearms License is not prohibited by S This includes compliance with zoning ordinances.	tate or local law at the pre	mises show	n in
	0 days after the application is approved, the business will comply with the requuct of business.	irements of State and local	law applic	able to
Business met.	will not be conducted under the license until the requirements of State and local	al law applicable to the bus	iness have l	been
	eted copy of this form has been sent (mailed or delivered) to the Chief Law Enfo is located. (See instruction #5.)	rcement Officer of the loca	lity in whic	h the
	red by 18 U.S.C. 923 (d)(1)(G), I certify that secure gun storage or safety device are sold under this Federal Firearms License to persons who are not licensees.	s will be available at any p	lace in whic	ch
Name of Chief Law	Enforcement Officer (CLEO)			
CLEO's Address (In	clude no., street, city, county, State, and ZIP Code)			
examined this best of my kno when presente constitute cons representative statements and Specifically, I I Military inform	Under the penalties imposed by 18 U.S.C. 924, I declare that I have application and the documents submitted in support thereof, and to the wledge and belief, they are true, correct and complete. This signature, d by a duly authorized representative of the Department of Justice, will ent and authority for the appropriate Department of Justice to examine and obtain copies and abstracts of records and to receive information regarding the background of all responsible persons. Hereby authorize the release of the following data or records to ATF: mation/records, medical information/records, police and criminal records.	Attach 2 X 2 Photograp Here		
Sign Here				
Tiere		(See Instruction	on #10)	
m: d	_			
Title				
Date				
For ATF Use Only				
29. Application is	Reasons for Denial of Application			
Approved				
Signature of Licens			Date	

Application for Federal Firearms License

 Trade of Busine code) Contact Contact Business F Cell Phone Applic 		3. Employer Identification Number (EIN#) or Social Security Number (SSN is Voluntary) 6. Mailing Address (If different from address in Fax Number [4. Name of County Business is Loca in item #5)						
5. Busine code) 7. Contact Business F Cell Phone 8. Applic	ess Address (RFD or street number, city, State, and ZIP (NOTE: The business address CANNOT be a P.O. Box.) ext Numbers (Include Area Code) Phone	Social Security Number (SSN is Voluntary) 6. Mailing Address (If different from address in Fax Number	Business is Loca						
code) 7. Contact Business F Cell Phone 8. Applic	(NOTE: The business address CANNOT be a P.O. Box.) et Numbers (Include Area Code) Phone	Fax Number	n item #5)						
Business F Cell Phone 8. Applic	Phonee								
Cell Phono	e								
8. Applic		24 II F							
	ant's Business is (Select one)	24 Hour Emergency # (If different)							
	1								
9 Descril	Individually Owned A Partnership	A Corporation Other (Specify)							
Firearr	be Specific Activity Applicant is Engaged in, or Intends to ms License. (Sale of ammunition alone does not require a	ı license.)	10. Do You Intend to Business as a Pav Yes	vnbroker?					
	ication is Made For a License Under 18 U.S.C. Chapter 4-oplication. Licenses are issued for a 3-year period. See i		bmit the jee notea nex	ct to the box v	with				
Type	Description of License Type								
	Dealer (01), Including Pawnbroker (02), in Firearms Other Than Destructive Devices (Includes: Rifles, Shotguns, Pistols, Revolvers, Gunsmith activities and National Firearms Act (NFA) Weapons)								
06	Manufacturer of Ammunition for Firearms Other Than A	mmunition for Destructive Devices or Armor Pic	ercing Ammunition	\$30					
	Manufacturer of Firearms Other Than Destructive Device			\$150					
08	Importer of Firearms Other Than Destructive Devices or Ammunition Other Than Armor Piercing Ammunition (N			\$150]				
	Dealer in Destructive Devices			\$3000					
	Manufacturer of Destructive Devices, Ammunition for D			\$3000	<u> </u>				
11	Importer of Destructive Devices, Ammunition for Destru	ctive Devices or Armor Piercing Ammunition (S	Total Fees \$	\$3000					

13. Hours	ration of Applic	ant's Business	(Must be	completed)			1	4. Is Applicant Presently Engage			
Time	Sun	Mon	Tues	Wed	Thu	Fri	Sat		Requiring a Federal Firearms answer 14a.)	Licens	e? (If "Yes,"
Open									Yes	\square N	lo
								1	4a. Present Federal Firearms Lic		
Close											
		Served in the Ar			Service Serial Nu	ımber			Military Branch		
the Se	ervice Se	erial Number an	d Military Brai	nch.							
16. Appli	icant's Bu	usiness Premise	s Are		_		17. Indicate	Тур	e of Business Premises		
Own	ned	Lea	ased/Rented		Military		Zoned Comme	raia1	Zoned : Residential:		
		LEASED, PLEA JMBER OF TH			ME, ADDRESS	S, AND		ore F		Family	Dwelling
		s of Property Ov			•			fice			_
Traine and	i i idai est	s of Froperty o	wher (i) applied	.010)							/Apartment
									Gun Club Hotel/N		
								•	y Base Public	Housin	g
								her (Specify)		
Telephone	e Numbe	er of Property O	wner (<i>If applic</i>	able)							
									SES ARE LOCATED ON A MII N, ATTACH A COPY OF WRIT		Y
18. Do Y	ou Inten	d To Make a Pr	ofit from Your	Business'	?		AUTHORIZ	ZAT	ION FROM THE BASE COMM	ANDE	
	Yes		No (If no, do n	ot submit	application)		CONDUCT INSTALLA		TREARMS BUSINESS ON THE N.	E MILI	ΓARY
18a. Do Y	You Inter	nd To Sell Firea	rms Only at G	un Shows	?		19. Do You Firearm		end to Use Your License Only to	Acquir	re Personal
	Yes (If y	es, do not subm	it application)		No No		I —		es, do not submit application.)		No
			If Business	was Obtai	ned From Some	one Else			owing Information.		
20. Name	e of Prev	ious Business					21. Federal	Fire	arms License Number		
									ersons in the Business. See Instr		
									"Mary Alice (Smith) Jones," Not Complete All Information in th		
		1			Country of		_				
	I	Position and	Home Addre	ess	Citizenship	Place Birt	I		D 154 ***		
E IIN.		ocial Security Number	Please provi		more than one, fapplicable.		Date	of	Race and Ethnicity	G.	Residence
Full Na	ame (Social Security	every address	you N	onimmigrant	(City State,		h	(Please check one	Sex	Telephone No.
		Number is Voluntary)	have had in t last 5 years		s must complete information in	Forei	gn		or more boxes)		
					item #23.	Count	<i>רצו</i>				
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific		
									White		
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific Islander		
									White		

Full N	Name	Position and Social Security Number (Social Security Number is Voluntary)	Home Address Please provide every address you have had in the last 5 years.	Country of Citizenship List more than one, if applicable. Nonimmigrant aliens must complete all information in item #23.	Place of Birth (City, State, or Foreign Country)	Date of Birth	Race and Ethnicity (Please check one or more boxes)	Sex	Residence Telephone No.
							American Indian or Alaska Native		
							Asian		
							Black or African American		
							Hispanic or Latino		
							Native Hawaiian or Other Pacific		
							White		
							A In diam on Alaska Nation		
							American Indian or Alaska Native		
							Asian		
							Black or African American		
							Hispanic or Latino Native Hawaiian or Other Pacific		
							Islander		
							White		
23. Non	nimmigrai	nt Alien Certific	ation of Complianc	e With 18 U.S.C. 922((g)(5)(B). If	additional sp	ace is needed, use a separate she	eet.	
affecting	g commer	ce, any firearms	or ammunition; or	to receive any firearm	ıs or ammuni	ition which ha	in interstate or foreign commerc ave been shipped or transported fying compliance with 18 U.S.C	in inters	state or foreign
A. Nam	ne of Pers	on Certifying Co	ompliance Las	t:		First:	Middl	e Initial	:
B. Immi	igration a	nd Customs Enf	Forcement (ICE) Iss	ued Alien Number or A	Admission N	lumber (Previ	iously INS Number):		
C. Are	you in po	ssession of a val	id hunting license of	or permit lawfully issue	ed in the Uni	ited States?	Yes	No	
							Federal firearms licensee. or permit to the application.		
	——————————————————————————————————————	unting License of	or Permit Number, i	f any	State of 1	Issuance	Expiration Date	e, if any	
Give Fu	ıll Details	on a Separate	Sheet for All "Yes	s" Answers in Items 2	24 and 25.			Yes	No
	Applicar		ederal Firearms Lic	cense?					
	ny Persor erred to in		nied a Federal Firea	arms License?					
	n 22 Abov	0 5	Officer in a Corpor	ation Holding a Federa	al Firearms I	License?			
		D. Been an	Employee of a Fed	eral Firearms Licensee	e?				
		E. Had a Fe	ederal Firearms Lice	ense Revoked?					
	Applicant of Person	at or A. Charged by Information or Under Indictment in any Court for a Felony, or any Other Crime for Which the Judge Could Imprison You for More Than One Year? ¹							
	ned in Ite Above:	m B. A Fugiti	ve from Justice?						
22 F	Above:	C. An Alier	n Who is Illegally o	r Unlawfully in the Un	nited States?				
		D. Under 2	1 Years of Age?						
			wful User of, or Adntrolled Substance?		or any Depre	ssant, Stimul	ant or Narcotic Drug, or any		
F. Subject to a Court Order Restraining Him/Her from Harassing, Stalking, or Threatening his/her child or an Intimate Partner or Child or Such Partner?									

Give Full Details o	n a Separate Sheet for All "Yes" Answers in Item 26.		Yes	No
26. Has Applicant or any Person	A. Been Convicted in any Court of a Felony, or any other crime for which the Juc You for More Than One Year, Even if You Received a Shorter Sentence, Inclu			
Named in Item 22 Ever:	B. Been Discharged from the Armed Forces Under Dishonorable Conditions?			
ZZ EVCI.	C. Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Includes Having Been Adjudicated Adjudicate	cated Incompetent to		
	D. Renounced United States Citizenship?			
	E. Been Convicted in any Court of a Misdemeanor Crime of Domestic Violence?	(See definition #3)		
² You may answer	a formal accusation of crime made by a prosecuting attorney, as distinguished from NO if (a) you have been pardoned for the crime or (b) the conviction has been expute are not prohibited from possessing or receiving any firearms under the law where	nged or set aside or (c) your		
27. Applicant Cer	tification (Please read and initial each box)			
	ness to be conducted under the Federal Firearms License is not prohibited by S This includes compliance with zoning ordinances.	State or local law at the pre	mises show	n in
	0 days after the application is approved, the business will comply with the required of business.	irements of State and local	l law applic	able to
Business met.	will not be conducted under the license until the requirements of State and loc	al law applicable to the bus	siness have	been
	eted copy of this form has been sent (mailed or delivered) to the Chief Law Enfo is located. (See instruction #5.)	rcement Officer of the loca	llity in whic	ch the
	red by 18 U.S.C. 923 (d)(1)(G), I certify that secure gun storage or safety device are sold under this Federal Firearms License to persons who are not licensees.		lace in whi	ch
	Enforcement Officer (CLEO)			
CLEO's Address (In	iclude no., street, city, county, State, and ZIP Code)			
this application knowledge and by a duly auth and authority obtain copies a the backgroun the following d	Under the penalties imposed by 18 U.S.C. 924, I declare that I have examined in and the documents submitted in support thereof, and to the best of my I belief, they are true, correct and complete. This signature, when presented orized representative of the Department of Justice, will constitute consent for the appropriate Department of Justice representative to examine and and abstracts of records and to receive statements and information regarding d of all responsible persons. Specifically, I hereby authorize the release of lata or records to ATF: Military information/records, medical ecords, police and criminal records.	Attach 2 X 2 Photograp Here		
Here		(See Instructi	on #10)	
Title				
Date				
For ATF Use Only				
29. Application is	Reasons for Denial of Application			
Approved				
Signature of Licen	sing Official		Date	

Application for Federal Firearms License

For ATI	Use Only								
1. Name	of Owner or Corporation (If partnership, include name of	feach partner)							
2. Trade	or Business Name, if any	3. Employer Identification Number (EIN#) or Social Security Number (SSN is Voluntary)	4. Name of County Business is Loca						
	ess Address (RFD or street number, city, State, and ZIP (NOTE: The business address CANNOT be a P.O. Box.)	6. Mailing Address (If different from address in	in item #5)						
7 Conta	ct Numbers (Include Area Code)								
Business		Fax Number							
			<u> </u>						
Cell Phor		24 Hour Emergency # (If different)							
8. Appli	cant's Business is (Select one)	A Corporation Other (Specific)							
0 P	Individually Owned A Partnership	A Corporation Other (Specify)							
	be Specific Activity Applicant is Engaged in, or Intends to ms License. (Sale of ammunition alone does not require		10. Do You Intend to Business as a Pay						
			Yes	No					
	ication is Made For a License Under 18 U.S.C. Chapter 4 pplication. Licenses are issued for a 3-year period. See		ubmit the fee noted nex	xt to the box with					
Type	Description of License Type								
01/02	Dealer (01) Including Payabraker (02) in Firearms Other Than Destructive Devices (Includes: Piflas Shotgurs Pistals								
06	Manufacturer of Ammunition for Firearms Other Than A	ammunition for Destructive Devices or Armor Pi	iercing Ammunition	\$30					
07	Manufacturer of Firearms Other Than Destructive Devic	es		\$150					
08	Importer of Firearms Other Than Destructive Devices or Ammunition Other Than Armor Piercing Ammunition (\$150					
09	Dealer in Destructive Devices			\$3000					
10	Manufacturer of Destructive Devices, Ammunition for D			\$3000					
11	Importer of Destructive Devices, Ammunition for Destru	active Devices or Armor Piercing Ammunition (\$3000					
			Total Fees \$						

13. Hour	s or Op	eration of Applic	cant's Business (must be co	отрівіва)				14. Is Applicant Presently Engage		
Time	Sui	n Mon	Tues	Wed	Thu	Fri		Sat	Requiring a Federal Firearms answer 14a.)	Licens	se? (If "Yes,"
Open									Yes	□ N	lo
									14a. Present Federal Firearms Lic	ense N	lumber
Close											
		Served in the A Serial Number ar			ervice Serial Nu	ımber			Military Branch		
16. Appl	icant's I	Business Premise	es Are				17.	Indicate Ty	pe of Business Premises		
Ow	ned	Le	eased/Rented		Military			Zoned	Zoned		
		LEASED, PLEA			ME, ADDRESS	S, AND		Commercia		Б 11	D 11:
		UMBER OF TH ss of Property O					-	Store			Dwelling
ivallic alic	i Addic	ss of Froperty O	wher (1) applica	wie)				Office			n/Apartment
									& Gun Club Hotel/N		
									ry Base Public	Housin	ng
								Other	(Specify)		
Telephon	e Numb	er of Property O	wner (<i>If applica</i>	able)							
									IISES ARE LOCATED ON A MII ON, ATTACH A COPY OF WRIT		Y
18. Do Y	ou Inte	nd To Make a Pi	rofit from Your	Business?			AU	THORIZA	TION FROM THE BASE COMM	ANDE	
	Yes		No (If no, do n				INS	STALLATIO			
18a. Do	You Int	end To Sell Fire	arms Only at G	un Shows?			19.	Do You In Firearms?	tend to Use Your License Only to	Acquii	re Personal
	Yes (If	yes, do not subn			No No			Yes (If	yes, do not submit application.)		No
20. 17	2.5		If Business v	vas Obtain	ed From Some	one Else			llowing Information.		
20. Name	e of Pre	vious Business					21.	Federal Fi	rearms License Number		
Resp	onsible	Person Definition	on. If a Female,	List Any (Given, Married,	, and Ma	iden	Names, e.g	Persons in the Business. See Instruction, "Mary Alice (Smith) Jones," Not	"Mrs.	John
Jones	s." (If a	dditional space	is needed, use a			esponsit	oie P	erson Mus	t Complete All Information in th	is Sect	ion.
		Position and	Home Addre		Country of Citizenship	Place Birt					
		Social Security Number	Please provid		nore than one, applicable.	Dirt	"	Date of	Race and Ethnicity		Residence
Full Na	ame	(Social Security	every address	vou No	nimmigrant	(City State,		Birth	(Please check one	Sex	Telephone No.
		Number is Voluntary)	have had in the last 5 years.		must complete nformation in	Forei	gn		or more boxes)		110.
		, ошини у	rust e yeurs.		item #23.	Count	ry)				
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific		
									White		
									American Indian or Alaska Native		
									Asian		
									Black or African American		
									Hispanic or Latino		
									Native Hawaiian or Other Pacific		
									☐ Islander ☐ White		
						1				1	

Full Nam	Socia Ni (Socia Nu	ition and Il Security umber al Security umber is luntary)	Home Address Please provide every address you have had in the last 5 years.	Country of Citizenship List more than one, if applicable. Nonimmigrant aliens must complete all information in item #23.	Place of Birth (City, State, or Foreign Country)	Date of Birth	Race and Ethnicity (Please check one or more boxes)	Sex	Residence Telephone No.
							American Indian or Alaska Native		
							Asian		
							Black or African American		
							Hispanic or Latino		
							Native Hawaiian or Other Pacific		
							White		
							A A la alaa Nadina		
							American Indian or Alaska Native		
							Asian		
							Black or African American		
							Hispanic or Latino Native Hawaiian or Other Pacific		
							Islander		
							White		
23. Nonimr	nigrant Ali	ien Certific	ation of Complianc	e With 18 U.S.C. 922((g)(5)(B). If	additional sp	ace is needed, use a separate she	et.	
affecting co	mmerce, ai	ny firearms	or ammunition; or	to receive any firearm	ıs or ammuni	ition which ha	in interstate or foreign commerce ave been shipped or transported fying compliance with 18 U.S.C	in inters	state or foreign
A. Name of	Person Co	ertifying Co	ompliance Las	t:		First:	Middle	e Initial	:
B. Immigrat	tion and Cu	ustoms Enf	Forcement (ICE) Iss	ued Alien Number or A	Admission N	lumber (Previ	iously INS Number):		
C. Are you	in possessi	ion of a val	id hunting license of	or permit lawfully issue	ed in the Uni	ited States?	Yes	No	
							Federal firearms licensee. or permit to the application.		
	Huntin	g License o	or Permit Number, i	f any	State of 1	Issuance	Expiration Date	, if any	
Give Full D	etails on a	a Separate	Sheet for All "Yes	s" Answers in Items 2	24 and 25.			Yes	No
24. Has Ap	•	A. Held a F	ederal Firearms Lic	cense?					
or any I Referre	d to in		nied a Federal Fire						
Item 22	Above: C			ation Holding a Federa		License?			
				eral Firearms Licensee	e?				
			ederal Firearms Lice						
25. Is Appliany Per	I	Judge Could Imprison You for More Than One Year?							
Named 22 Abo	1.0	B. A Fugiti	ve from Justice?						
22 A00	ve:	C. An Alier	n Who is Illegally o	r Unlawfully in the Un	nited States?				
	Г	D. Under 2	1 Years of Age?						
	E		wful User of, or Adntrolled Substance?		or any Depre	ssant, Stimul	ant or Narcotic Drug, or any		
F. Subject to a Court Order Restraining Him/Her from Harassing, Stalking, or Threatening his/her child or an Intimate Partner or Child or Such Partner?									

Give Full Details o	n a Separate Sheet for All "Yes" Answers in Item 26.		Yes	No
26. Has Applicant or any Person	A. Been Convicted in any Court of a Felony, or any other crime for which the Judg You for More Than One Year, Even if You Received a Shorter Sentence, Inclu			
Named in Item 22 Ever:	B. Been Discharged from the Armed Forces Under Dishonorable Conditions?			
ZZ EVCI.	C. Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudic Manage Your Own Affairs, or Been Committed to any Mental Institution?	eated Incompetent to		
	D. Renounced United States Citizenship?			
	E. Been Convicted in any Court of a Misdemeanor Crime of Domestic Violence?	(See definition #3)		
² You may answer	a formal accusation of crime made by a prosecuting attorney, as distinguished from a NO if (a) you have been pardoned for the crime or (b) the conviction has been expure a renot prohibited from possessing or receiving any firearms under the law where	nged or set aside or (c) your		have been
27. Applicant Cer	tification (Please read and initial each box)			
item 5. 7 Within 3	ness to be conducted under the Federal Firearms License is not prohibited by S This includes compliance with zoning ordinances. O days after the application is approved, the business will comply with the requ	-		
the cond	uct of business.			
Business met.	will not be conducted under the license until the requirements of State and loca	l law applicable to the bus	iness have	been
_	eted copy of this form has been sent (mailed or delivered) to the Chief Law Enforces is located. (See instruction #5.)	rcement Officer of the loca	lity in whic	h the
As requifirearms	ired by 18 U.S.C. 923 (d)(1)(G), I certify that secure gun storage or safety devices are sold under this Federal Firearms License to persons who are not licensees.	s will be available at any p	olace in whi	ch
Name of Chief Law	Enforcement Officer (CLEO)			
CLEO's Address (In	clude no., street, city, county, State, and ZIP Code)			
this application knowledge and by a duly auth and authority obtain copies a the backgroun the following d	Under the penalties imposed by 18 U.S.C. 924, I declare that I have examined and the documents submitted in support thereof, and to the best of my belief, they are true, correct and complete. This signature, when presented orized representative of the Department of Justice, will constitute consent for the appropriate Department of Justice representative to examine and and abstracts of records and to receive statements and information regarding d of all responsible persons. Specifically, I hereby authorize the release of lata or records to ATF: Military information/records, medical ecords, police and criminal records.	Attach 2 X 2 Photograp Here		
Sign Here		(See Instruction	on #10)	
Title				
Date				
For ATF Use Only				
29. Application is	Reasons for Denial of Application			
Approved	Denied			
Signature of Licen	sing Official		Date	

Bureau of Alcohol, Tobacco, Firearms and Explosives

Application for Federal Firearms License

For ATF	Use Only		<u> </u>						
1. Name	of Owner or Corporation (If partnership, include name of	of ea	ach partner)						
2. Trade	or Business Name, if any	3.		fication Number (EI Number (SSN is Vol	4. Name of County in Which Business is Located				
	ess Address (RFD or street number, city, State, and ZIP (NOTE: The business address CANNOT be a P.O. Box.)		. Mailing Address	(If different from a	ddress in	item #5)			
7. Conta	ct Numbers (Include Area Code)								
Business	Phone	Fa	ax Number						
Cell Phon	ne	24	Hour Emergency	# (If different)		_			
8. Applie	cant's Business is (Select one)							_	
• • •	Individually Owned A Partnership		A Corporation	Other (Speci	fy)				
9. Describe Specific Activity Applicant is Engaged in, or Intends to Engage in, Which Requires a Federal Firearms License. (Sale of ammunition alone does not require a license.) 10. Do You Intend to Business as a Pav									
	ication is Made For a License Under 18 U.S.C. Chapter 4-pplication. Licenses are issued for a 3-year period. See it					mit the fee noted ne	xt to the b	ox with	
Туре			on of License Type		·		Fee		
01/02	Dealer (01) Including Pountraker (02) in Firegrees Other Than Destructive Devices (Includes: Piffer Shotgams Pistals								
06 Manufacturer of Ammunition for Firearms Other Than Ammunition for Destructive Devices or Armor Piercing Ammunition							\$30		
07									
08	Importer of Firearms Other Than Destructive Devices or Ammunition for Firearms Other Than Destructive Devices, or Ammunition Other Than Armor Piercing Ammunition (NOTE: Importer of handguns and rifles, see instruction #8.)								
09	Dealer in Destructive Devices						\$3000		
10	Manufacturer of Destructive Devices, Ammunition for D						\$3000		
11	Importer of Destructive Devices, Ammunition for Destru	ructi	ve Devices or Arm	or Piercing Ammui	nition (Se		\$3000		
						Total Fees \$			

13. Hour	s or Op	eration of Appir	cant's Business	(Must be c	отріетеа)				14. Is Applicant Presently Engage				
Time	Sui	n Mon	Tues	Wed	Thu	Fri		Sat	Requiring a Federal Firearms answer 14a.)	Licens	e? (If "Yes,"		
Open									Yes		lo		
									14a. Present Federal Firearms Lic	ense N	lumber		
Close													
			armed Forces, Pr nd Military Bran		ervice Serial Nu	ımber	•	•	Military Branch				
16. Appl	icant's I	Business Premis	es Are				17.	Indicate Ty	rpe of Business Premises				
Ow	ned		eased/Rented		Military			Zoned	Zoned				
			ASE PROVIDE		ME, ADDRESS	S, AND		Commercia			D 11:		
			HE PROPERTY Owner (If application				-	Store			Dwelling		
rvanic and	a Addic	ss of Froperty C	wher (ij applied	ιοιε)				Office			n/Apartment		
									& Gun Club Hotel/I				
							Military Base Public Housing						
								Other	(Specify)				
Telephon	e Numb	er of Property (Owner (If applied	able)									
									ISES ARE LOCATED ON A MII ON, ATTACH A COPY OF WRIT		Y		
18. Do Y	ou Inte	nd To Make a P	rofit from Your	Business?			AU	THORIZA	TION FROM THE BASE COMM	ANDE			
	Yes		No (If no, do n	ot submit d	application)		CONDUCT A FIREARMS BUSINESS ON THE MILITARY INSTALLATION.						
18a. Do	You Int	end To Sell Fire	earms Only at G	un Shows?	•		19.	Do You In Firearms?	tend to Use Your License Only to	Acquii	re Personal		
	Yes (If	yes, do not subi	nit application)		No No			_	yes, do not submit application.)		No		
			If Business	was Obtain	ed From Some	one Else			llowing Information.				
20. Name	e of Pre	vious Business					21.	Federal Fir	rearms License Number				
									Persons in the Business. See Instr g., "Mary Alice (Smith) Jones," Not				
									t Complete All Information in th				
		D	TT A 11		Country of	Place	of						
		Position and Social Security	Home Addre	I	Citizenship more than one,	Birth	h		Race and Ethnicity		Dosidence		
Full Na	ame	Number	NumberPlease provideif applicable.ocial Securityevery address youNonimmigrantNumber ishave had in thealiens must complete	(City	γ,	Date of Birth		Sex	Residence Telephone				
		Number is			aliens must complete	State, Forei		r	or more boxes)		Ño.		
		Voluntary)	last 5 years		nformation in item #23.	Count							
									American Indian or Alaska Native				
									Asian				
									Black or African American				
									Hispanic or Latino				
									Native Hawaiian or Other Pacific				
									☐ Islander ☐ White				
									American Indian or Alaska Native				
									Asian				
									Black or African American				
									Hispanic or Latino Native Hawaiian or Other Pacific				
									Islander				
									White				

Full Name	Position and Social Security Number (Social Security Number is Voluntary)	Home Address Please provide every address you have had in the last 5 years.	Country of Citizenship List more than one, if applicable. Nonimmigrant aliens must complete all information in item #23.	Place of Birth (City, State, or Foreign Country)	Date of Birth	Race and Ethnicity (Please check one or more boxes)	Sex	Residence Telephone No.	
						American Indian or Alaska Native			
						Asian			
						Black or African American			
						Hispanic or Latino			
						Native Hawaiian or Other Pacific Islander			
						White			
						American Indian or Alaska Native			
						Asian			
						Black or African American			
						Hispanic or Latino			
						Native Hawaiian or Other Pacific			
						White			
23. Nonimmigrant Alien Certification of Compliance With 18 U.S.C. 922(g)(5)(B). If additional space is needed, use a separate sheet.									
18 U.S.C. 922(g)(5)(B) generally makes it unlawful for any nonimmigrant alien to ship or transport in interstate or foreign commerce, or possess in or affecting commerce, any firearms or ammunition; or to receive any firearms or ammunition which have been shipped or transported in interstate or foreign commerce. All nonimmigrant aliens listed in item 22 must complete the following information certifying compliance with 18 U.S.C. 922(g)(5)(B).									
A. Name of Person Certifying Compliance Last: First: Middle						Initial:			
B. Immigration and Customs Enforcement (ICE) Issued Alien Number or Admission Number (Previously INS Number):									
C. Are you in possession of a valid hunting license or permit lawfully issued in the United States? Yes No 1. If you answered "NO," you likely cannot lawfully possess a firearm and therefore cannot be a Federal firearms licensee. 2. If you answered "YES," complete the following information, and attach a copy of the license or permit to the application.									
Hunting License or Permit Number, if any State of Issuance Expiration Date, if any									
Give Full Details on a Separate Sheet for All "Yes" Answers in Items 24 and 25.							Yes	No	
24. Has Applic or any Pers		A. Held a Federal Firearms License? B. Been Denied a Federal Firearms License?							
Referred to	in B. Been De								
Item 22 Ab	o , o .	D. Been an Employee of a Federal Firearms License?							
		E. Had a Federal Firearms License Revoked?							
25. Is Applicar any Person	t or A. Charged								
Named in I		ve from Justice?	Tor wrote Than One T	car:			$\overline{\Box}$		
22 Above:		C. An Alien Who is Illegally or Unlawfully in the United States?							
		D. Under 21 Years of Age?							
		wful User of, or Ad ntrolled Substance?		or any Depre	ssant, Stimul	ant or Narcotic Drug, or any			
		o a Court Order Re Partner or Child or		n Harassing,	Stalking, or	Threatening his/her child or an			

Give Full Details of	n a Separate Sheet for All "Yes" Answers in Item 26.		Yes	No
26. Has Applicant or any Person	A. Been Convicted in any Court of a Felony, or any other crime for which the Juc You for More Than One Year, Even if You Received a Shorter Sentence, Inclu			
Named in Item 22 Ever:	B. Been Discharged from the Armed Forces Under Dishonorable Conditions?			
22 Ever:	C. Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Defective, Which Includes Having Been Adjudicated as a Mental Institution?	cated Incompetent to		
	D. Renounced United States Citizenship?			
² You may answer	A formal accusation of crime made by a prosecuting attorney, as distinguished from NO if (a) you have been pardoned for the crime or (b) the conviction has been expute are not prohibited from possessing or receiving any firearms under the law where	inged or set aside or (c) your		
27. Applicant Cert	tification (Please read and initial each box)			
	ness to be conducted under the Federal Firearms License is not prohibited by This includes compliance with zoning ordinances.	State or local law at the pre	emises show	n in
	0 days after the application is approved, the business will comply with the request of business.	uirements of State and local	l law applic	eable to
Business met.	will not be conducted under the license until the requirements of State and loc	al law applicable to the bus	siness have	been
	eted copy of this form has been sent (mailed or delivered) to the Chief Law Enfo is located. (See instruction #5.)	orcement Officer of the loca	ality in whic	ch the
	red by 18 U.S.C. 923 (d)(1)(G), I certify that secure gun storage or safety devic are sold under this Federal Firearms License to persons who are not licensees		olace in whi	ch
	Enforcement Officer (CLEO)			
CLEO's Address (In	clude no., street, city, county, State, and ZIP Code)			
this application knowledge and by a duly authority and authority obtain copies a the backgroun the following dinformation/re	Under the penalties imposed by 18 U.S.C. 924, I declare that I have examined and the documents submitted in support thereof, and to the best of my I belief, they are true, correct and complete. This signature, when presented orized representative of the Department of Justice, will constitute consent for the appropriate Department of Justice representative to examine and and abstracts of records and to receive statements and information regarding d of all responsible persons. Specifically, I hereby authorize the release of lata or records to ATF: Military information/records, medical cords, police and criminal records.	Attach 2 X 2 Photograp Here		
Sign Here (See Instruc				
Title				
Date				
For ATF Use Only				
29. Application is	Reasons for Denial of Application			
Approved			Det	
Signature of Licens	sing Official		Date	

Instruction Sheet For ATF Form 7 (5310.12) (Detach this instruction sheet before submitting your application.)

- 1. TYPE or PRINT with ball-point pen, except for the signature in item 28. Any attached sheets must:
 - a. Be identified with your name, trade name, address, and Employer Identification Number or Social Security Number (Social Security Number is Voluntary) at the top of each page.
 - b. Refer to the questions being answered.
- 2. Issuance of your license will be delayed if the fee is not included or incorrect, or if the form is incomplete or otherwise improperly prepared.
- 3. A license Under 18 U.S.C. Chapter 44:
 - a. Is **NOT** a license to carry, use, or possess a firearm.
 - b. Confers **NO** right or privilege to conduct business or activity contrary to State or other law.
 - c. Is a business license, and will **NOT** be issued to an applicant solely intending to enhance a personal firearms collection. Applicants for a collector of curios and relics license must submit an ATF Form 7CR (5310.16).
 - d. Is **NOT** a license to sell ammunition only.
 - e. Is **NOT** a license to buy and sell firearms at gun shows only.
- 4. In most cases, ATF will contact you prior to issuance of a license. If you do not qualify for a license, you will be advised in writing of the reasons for denial and your application fee will be returned. Please note ATF cannot place calls to blocked numbers.
- 5. Applicants must submit "copy 3" of this form to the Chief Law Enforcement Officer (CLEO) of the locality in which the premises sought to be licensed are located. The CLEO is the Chief of Police, the Sheriff, or an equivalent officer, or the designee of such individual.
- 6. State laws or local ordinances may have requirements affecting your proposed firearms business. Contact your State and local authorities for specific information on their requirements, see item #27.
- 7. The certification in item 28 must be signed by the owner, a partner, or in the case of a corporation, association, etc., by an officer duly authorized to sign for the applicant.
- 8. Applicants intending to import firearms and ammunition may need to register with ATF under the provisions of the Arms Export Control Act. Contact the Firearms and Explosives Imports Branch at (304) 616-4550 for further information on registration.
- 9. Applicants intending to deal in, import, or manufacture weapons subject to the National Firearms Act (e.g., machineguns, short-barrel shotguns, and destructive devices) are required to pay a Special (Occupational) Tax. Contact the National Firearms Act Branch at (304) 616-4500.
- 10. IMPORTANT!! All responsible persons, to include sole proprietors, must submit a properly prepared FD-258 (*Fingerprint Card*) with this application. Fingerprints must be taken by appropriate law enforcement authorities on the enclosed pre-printed FD-258. The pre-printed FD-258 should reflect "WVATF1100, ATF-FFLC, MARTINSBURG, WV" to preclude rejection of your fingerprints. A 2" x 2" frontal view photograph, taken within the last 6 months, and clearly showing a full front view of the features of the applicant with head bare, must also accompany this application. Please ensure that each photograph is clearly identified on the reverse with the full name of the responsible person to whom the photograph applies, and attach to ATF Form 7 (5310.12) in the space provided on copy 1. If there are multiple responsible persons, affix each photograph (with tape) of each responsible person to a separate sheet of paper and attach to this form.

IN ADDITION TO A SOLE PROPRIETOR, A RESPONSIBLE PERSON IS:

In the case of a corporation, partnership, or association, any individual possessing, directly or indirectly, the power to direct or cause the direction of the management, policies, and practices of the corporation, partnership, or association, insofar as they pertain to firearms.

- 11. MULTIPLE LICENSES You can apply for more than one license if the business is to be conducted at the same location, by checking more than one type of license in Item #11. If business is to be conducted at multiple locations, a separate application and license fee is required for each business location.
- 12. This form requires you to authorize the release of certain information to ATF such as medical information/records. (See item 28). This information is used to determine, for example, whether the applicant has ever been adjudicated as a mental defective or committed to any mental institution. This information is protected by the Privacy Act of 1974 and cannot be disclosed without your written authorization.
- 13. PLEASE FORWARD THE APPLICATION WITH FEE, PHOTOGRAPH(S), AND FINGERPRINT CARD(S) TO:

BUREAU OF ALCOHOL, TOBACCO, FIREARMS AND EXPLOSIVES P.O. BOX 409567 ATLANTA, GA 30384-9567

YOU CAN PAY BY CREDIT/DEBIT CARD (if you chose this option, complete item #12), OR CHECK OR MONEY ORDER MADE PAYABLE TO ATF. PLEASE DO NOT SEND CASH.

IF YOU HAVE ANY QUESTIONS RELATING TO THIS APPLICATION, PLEASE CONTACT THE ATF FEDERAL FIREARMS LICENSING CENTER, 244 NEEDY ROAD, MARTINSBURG, WEST VIRGINIA 25405, (304) 616-4600 OR TOLL FREE 1-866-662-2750, OR YOUR LOCAL ATF INDUSTRY OPERATIONS OFFICE.

ATF E-Form 7 (5310.12) Revised May 2005

Definitions

- 1. Restraining Order Under 18 U.S.C. 922 (g)(8), firearms may not be possessed or received by persons subject to a court order that: (A) was issued after a hearing of which the person received actual notice and had an opportunity to participate in; (B) restrains such person from harassing, stalking, or threatening an intimate partner or child of such intimate partner or person, or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child; and (C) (i) includes a finding that such person represents a credible threat to the physical safety of such intimate partner or child; or (ii) by its terms explicitly prohibits the use, attempted use, or threatened use of physical force against such intimate partner or child that would reasonably be expected to cause bodily injury.
- 2. Intimate Partner With respect to a person, the spouse of the person, a former spouse of the person, an individual who is a parent of a child of the person, or an individual who cohabitates or has cohabitated with the person.
- 3. Misdemeanor Crime of Domestic Violence A Federal, State, or local offense that is a misdemeanor under Federal or State law and has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent, or guardian of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, parent, or guardian, or by a person similarly situated to a spouse, parent, or guardian of the victim. The term includes all misdemeanors that have as an element the use or attempted use of physical force or the threatened use of a deadly weapon (e.g., assault and battery), if the offense is committed by one of the defined parties.
- **4. Secure Gun Storage or Safety Device** (A) a device that, when installed on a firearm, is designed to prevent the firearm from being operated without first deactivating the device; (B) a device incorporated into the design of the firearm that is designed to prevent the operation of the firearm by anyone not having access to the device; or (C) a safe, gun safe, gun case, lock box, or other device that is designed to be or can be used to store a firearm and that is designed to be unlocked only by means of a key, a combination, or other similar means.
- 5. Nonimmigrant Alien An alien in the United States in a nonimmigrant classification. The definition includes, in large part, persons traveling temporarily in the United States for business or pleasure, persons studying in the United States who maintain a residence abroad, and certain foreign workers. The definition does NOT include permanent resident aliens.
- 6. Hunting License or Permit Lawfully Issued in the United States A license or permit issued by a State for hunting which is valid and unexpired.

Privacy Act Information

The following information is provided pursuant to Section 3 of the Privacy Act of 1974 (5 U.S.C. § 552 a(e)(3)):

- 1. Authority. Solicitation of this information is authorized pursuant to 18 U.S.C. § 923 (a) of the Gun Control Act of 1968. Disclosure of this information is mandatory if the applicant wishes to obtain a Federal Firearms License.
- 2. **Purpose.** To determine the eligibility of the applicant to obtain a firearms license, and to determine the ownership of the business, the type of firearms or ammunition to be dealt in, the business hours, the business history, and the identity of the responsible persons in the business.
- 3. **Routine Uses.** The information will be used by ATF to make determinations set forth in paragraph 2. In addition, information may be disclosed to other Federal, State, foreign, and local law enforcement and regulatory agency personnel to verify information on the application and to aid in the performance of their duties with respect to the enforcement and regulation of firearms and/or ammunition where such disclosure is not prohibited by law. The information may further be disclosed to the Justice Department if it appears that the furnishing of false information may constitute a violation of Federal law. Finally, the information may be disclosed to members of the public in order to verify the information on the application when such disclosure is not prohibited by law.
- 4. **Effects of Not Supplying Information Requested.** Failure to supply complete information will delay processing and may result in denial of the application.
- 5. **Disclosure of Social Security Number.** Disclosure of the individual's social security number is voluntary. Under 18 U.S.C. § 923 (a), ATF has the authority to solicit this information. The number may be used to verify the individual's identity. See Section 7(b) of the Privacy Act.

Paperwork Reduction Act Notice

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection is used to determine the eligibility of the applicant to engage in certain operations, to determine location and extent of operations, and to determine whether the operations will be in conformity with Federal laws and regulations. The information requested is required to obtain or retain a benefit and is mandatory by statute(18 U.S.C. § 923).

The estimated average burden associated with this collection is 1 hour and 15 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.