APPLICATION FOR A EUROPEAN FIREARMS PASS

APPLICANT'S NAME: ……

ADDRESS: ……..

……..

TELEPHONE NO: ……..……

FIREARM CERTIFICATE NO: ……..……EXPIRY: ……..

SHOTGUN CERTIFICATE NO:……..……EXPIRY: ……..……

NAME OF EU COUNTRY TO VISIT:……

DATE OF DEPARTURE:……

DETAILS OF WEAPONS TO BE ENTERED ON EFP (WEAPONS MUST BE POSSESSED)

Make	Type & Action	Calibre	Serial Number
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Do you want a photo on EFP? YES ☐

NO ☐

If NO applicant may need to produce passport as ID.

If you require section 1 firearms on the EFP - ensure you have the abroad condition on your Firearm Certificate – if not, please return it for amendment.