

FIREARM LICENSING AUTHORITY

Application Form For Amendment to Firearm User's (Employee) Certificate



Please Amend Certificate to reflect the following:

Section A

Employer's Company	Employer's Name
Company Address	Employer's Home Address
Company Contact No.	Employer's Contact No.
Type of Business	Employer's Occupation

Section B

Applicant's Name		ATTACH PHOTOGRAPH HERE
Applicant's Address		
Applicant's Occupation	Applicant's TRN	
Applicant's Date of Birth	Applicant's P.S.R.A. Registration No.	

Section C -TO BE COMPLETED IN BLOCK CAPITALS. (Additional Space at back of form)

Employer's User Licence No.	Make	Type	Calibre	Booklet No.	Serial No.

