

Form-1 (Individual Licensee – License Originally Issued from the District)

Part – I (Licensee Details)

Name		Date of Birth (dd/mm/yyyy)	
Gender (M/F)		Occupation /Profession	
Parent/Spouse Name		Country	
Birth State		Birth District	
Phone Number (O)		Mobile No.	
Phone Number (R)		e-mail Address	

Present Address and Police Station:

Address		State	
		District	
Police Station Name		PIN Code	

Permanent Address and Police Station:

Address		State	
		District	
Police Station Name		PIN Code	

Part – II (Licence Details)

Licence Type	PB <input type="checkbox"/>	NPB <input type="checkbox"/>	Licence Status @	
Licence Number			Date of Issue (dd/mm/yyyy)	
Period of Validity	From (dd/mm/yyyy)		To (dd/mm/yyyy)	
Area Validity \$			Date of Area Validity (dd/mm/yyyy)	

Part – III (Weapon Details)

Total No. of Weapons		Licence Number	
Weapon - 1		Type #	
Category (NPB / PB)		Bore of Weapon	
Weapon Number		Make	
Maximum Number of cartridge allowed		Area of Validity \$	
Weapon - 2		Type #	
Category (NPB / PB)		Bore of Weapon	
Weapon Number		Make	
Maximum Number of cartridge allowed		Area of Validity \$	
Weapon - 3		Type #	
Category (NPB / PB)		Bore of Weapon	
Weapon Number		Make	
Maximum Number of cartridge allowed		Area of Validity \$	

Part – IV (Enclosures)

Photo Attached	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Self attested photocopy of the license attached	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Date:

Place:

Signature of Licensee

@ - New / Renew / Cancel / Duplicate

\$ - District / State / All India / 3 State / Other

- Gun, Pistol, Revolver, Rifle, Carbine, Short Pistol

ACKNOWLEDGEMENT

Name			
License Number		Police Station Name	
Address			

Name & Signature of Receipt Clerk