# SOUTH AFRICAN POLICE SERVICE



Application to declare premises a firearm free zone

# INSTRUCTIONS: APPLICATION TO DECLARE PREMISES A FIREARM FREE ZONE

### **GENERAL INSTRUCTIONS**

- An application to declare premises a firearm free zone must be completed in black ink that cannot be erased.
- The application must be stamped with the official date stamp of the police station where it is received.
- The police station where the application is received must complete Section A.
- The Central Firearms Control Register (CFR) must complete Section B.
- The person applying must complete Section C.
- The Designated Firearms Officer must complete Section D.
- The Station Commissioner must complete Section E.
- The Provincial Commissioner must complete Section F.
- The National Commissioner must complete Section G.
- The Secretariat of Safety and Security must complete Section H.
- The Minister of Safety and Security must complete Section I.
- A person is guilty of an offence in terms of the Firearms Control Act, 2000 (Act No 60 of 2000), if he/she provides information which he/she knows is false on this application form.

## SECTION A: FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS RECEIVED

# 1. Province

The name of the province where the police station is situated (for example, Gauteng) must be recorded in paragraph A 1.

## 2. Area

The name of the area where the police station is situated (for example, Pretoria) must be recorded in paragraph A 2.

# 3. Police station

The name of the police station where the application is received (for example, Brooklyn) must be recorded in paragraph A 3.

# 4. Component code

The component code of the police station where the application is received (for example, 47) must be recorded in paragraph A 4.

# 5. SAPS 86 reference number

The annual serial number of the firearm applications register allocated to the application (for example, 135/2002) must be recorded in paragraph A 5 .

# SECTION B: FOR OFFICIAL USE BY CENTRAL FIREARMS REGISTER (CFR)

# 1. Declared a Firearm Free Zone

The premises that was declared as a Firearm Free Zone must be recorded in paragraph B 1.

# 2. SAPS Head Office reference number

The SAPS Head Office reference number must be recorded in paragraph B 2.

# 3. Date received

The date on which the application is received must be recorded in paragraph B 3.

# 4. Date declared as a Firearm Free Zone

The date on which the premises is declared as a Firearm Free Zone must be recorded in paragraph B 4.

## 5. Government Gazette reference number

The Government Gazette reference number must be recorded in paragraph B 5.

### 6. Outstanding/Additional information required

The outstanding/additional information must be recorded in paragraph B 6.

# SECTION C: APPLICATION TO DECLARE PREMISES FIREARM FREE ZONE (Section 140 of the Firearms Control Act, 2000 (Act No 60 of 2000).

# 1. Name of institution

The name of the institution must be recorded in paragraph C 1.

### 2. Name of person applying on behalf of the institution

The name of person applying on behalf of the institution must be recorded in paragraph C 2.

# 3. SA ID/Passport

The type of identity must be indicated with an X in paragraph C 3.

# 4. Identity number

The identity number of the person applying must be recorded in paragraph C 4.

### 5. Passport number

The passport number of the person applying must be recorded in paragraph C 5.

# 6. Capacity of person applying

The capacity of the person applying (for example, owner of business) must be recorded in paragraph C 6.

#### 7. Names and surnames of persons on the safety team

The names and surnames of persons on the safety team must be recorded in paragraph C 7.

#### 8. Physical address of institution

The physical address where the applicant resides must be recorded in paragraph C 8.

# 9. Postal code

The postal code of the applicant's physical address must be recorded in paragraph C 9.

# 10. Postal address

The postal address of the applicant must be recorded in paragraph C 10.

# 11. Postal code

The postal code of the applicant's postal address must be recorded in paragraph C 11.

12. The applicable answer must be indicated with an X in paragraph C 12. If you answer yes, please supply the following information:

#### 13. Description of the safekeeping facilities

A description of the safekeeping facilities must be recorded in paragraph C 13.

# 14. Motivation of application

Motivation regarding the application must be recorded paragraph C 14.

#### 15. Contact particulars of person applyting

#### 15.1 Emergency telephone number

The emergency telephone number, including the dialling code of the applicant (for example, (012) 667 1923) must be recorded in paragraph C 15.1.

# 15.2 Fax

The applicant's fax number, including the area dialling code, must be recorded in paragraph C 15.2.

#### 16. Cellphone number

The cellphone number (if applicable) of the applicant must be recorded in paragraph C 16.

## 17. E-mail address

The e-mail address (if applicable) of the applicant must be recorded in paragraph C 17.

# 18. Conditions

The premises declared a Firearm Free Zone must be clearly identified and demarcated.

Signs must be erected/posted at all the main entrances to the premises in English and where applicable in the predominant local language and maintained.

A map of the premises which already specify the demarcated area and sign must be attached to the application.

The institution where premises are declared Firearm Free Zone must endeavour to mark all correspondence accordingly to reflect the premises firearm free status.

The person applying on behalf of the Institution must notify the Designated Firearms Officer responsible for the area of any changes that may occur to any information submitted in this application.

## 19. Name of applicant in block letters

The initials and surname (in block letters) of the applicant who applies for the Firearm Free Zone must be recorded in paragraph C 19.

#### 20. Date

The date on which the applicant applies for the Firearm Free Zone must be recorded in paragraph C 20.

# 21. Signature of applicant

The signature of applicant must be recorded in paragraph C 21.

# 22. Place

The city/town where the applicant applies for the Firearm Free Zone must be recorded in paragraph C 22.

# SECTION D: INSPECTION AND RECOMMENDATION OF DESIGNATED FIREARMS OFFICER

- 1. The inspection of the premises regarding this application must be recorded in paragraph D 1.
- **2.** The recommendation regarding this application must be recorded in paragraph D 2.

# 3. Name of Designated Firearms Officer in block letters

The initials and surname (in block letters) of the Designated Firearms Officer who made the recommendation must be recorded in paragraph D 3.

#### 4. Date

The date on which the Designated Firearm Officer made the recommendation must be recorded in paragraph D 4.

# 5. Rank of Designated Firearms Officer in block letters

The rank (in block letters) of the Designated Firearms Officer who made the recommendation must be recorded in paragraph D 5.

## 6. Place

The city/town where the Designated Firearms Officer made the recommendation must be recorded in paragraph D 6.

## 7. Signature of Designated Firearms Officer

The signature of the Designated Firearms Officer who made the recommendation must be recorded in paragraph D 7.

## 8. Persal number of the police official

The SAPS Persal number of the Designated Firearms Officer who made the recommendation must be recorded in paragraph D 8.

# SECTION E: RECOMMENDATION OF STATION COMMISSIONER

1. The recommendation regarding this application must be recorded in paragraph E 1.

## 2. Name of Station Commissioner in block letters

The initials and surname (in block letters) of the Station Commissioner who made the recommendation must be recorded in paragraph E 2.

# 3. Date

The date on which the Station Commissioner made the recommendation must be recorded in paragraph E 3.

## 4. Rank of Station Commissioner in block letters

The rank (in block letters) of the Station Commissioner who made the recommendation must be recorded in paragraph E 4.

# 5. Place

The city/town where the Station Commissioner made the recommendation must be recorded in paragraph E 5.

#### 6. Signature of Station Commissioner

The signature of the Station Commissioner who made the recommendation must be recorded in paragraph E 6.

# 7. Persal number of the police official

The SAPS Persal number of the Station Commissioner who made the recommendation must be recorded in paragraph E 7.

#### SECTION F: RECOMMENDATION BY PROVINCIAL COMMISSIONER

1. The recommendation regarding this application must be recorded in paragraph F 1.

# 2. Name of Provincial Commissioner in block letters

The initials and surname (in block letters) of the Provincial Commissioner who made the recommendation must be recorded in paragraph F 2.

# 3. Date

The date on which the Provincial Commissioner made the recommendation must be recorded in paragraph F 3.

## 4. Signature of Provincial Commissioner

The signature of the Provincial Commissioner who made the recommendation must be recorded in paragraph F 4.

### 5. Place

The city/town where the Provincial Commissioner made the recommendation must be recorded in paragraph F 5.

# SECTION G: RECOMMENDATION BY NATIONAL COMMISSIONER

**1.** The recommendation regarding this application must be recorded in paragraph G 1.

### 2. Name of National Commissioner in block letters

The initials and surname (in block letters) of the National Commissioner must be recorded in paragraph G 2.

# 3. Date

The date on which the National Commissioner made the recommendation must be recorded in paragraph G 3.

## 4. Signature of National Commissioner

The signature of the National Commissioner must be recorded in paragraph G 4.

## 5. Place

The city/town where the National Commissioner made the recommendation must be recorded in paragraph G 5.

# SECTION H: RECOMMENDATION BY SECRETARIAT OF SAFETY AND SECURITY

**1.** The recommendation regarding this application must be recorded in paragraph H 1.

# 2. Name of Secretary of Safety and Security in block letters

The initials and surname (in block letters) of the Secretary of Safety and Security must be recorded in paragraph H 2.

## 3. Date

The date on which the Secretary of Safety and Security made the recommendation must be recorded in paragraph H 3.

# 4. Signature of Secretary of Safety and Security

The signature of the Secretary of Safety and Security must be recorded in paragraph H 4.

# 5. Place

The city/town where the Secretary of Safety and Security made the recommendation must be recorded in paragraph H 5.

# SECTION I: APPROVAL/REFUSAL BY THE MINISTER OF SAFETY AND SECURITY

1. The approval/refusal regarding this application must be recorded in paragraph I 1.

# 2. Date

The date on which the Minister of Safety and Security approved/ refused the application must be recorded in paragraph I 2.

# 3. Signature of Minister of Safety and Security

The signature of the Minister of Safety and Security must be recorded in paragraph I 3.

# 4. Place

The city/town where the Minister of Safety and Security approved/refused the application must be recorded in paragraph I 4.

This document should be in triplicate as one should go to the applicant, one should go to he station for record purposes and one should be forwarded to Head Officer for further processing of the Firearm Free Zone declaration.