# **INFORMATION SHEET**

### Application for Renewal of a Firearms Licence for an Individual

## BEFORE YOU START...

**USE THIS FORM** to renew your firearms licence.

**DO NOT USE THIS FORM** to apply for a first-time licence or to change your existing Possession Only Licence to a Possession and Acquisition Licence. Call 1 800 731-4000 and ask for an "Application for a Possession and Acquisition Licence under the *Firearms Act* (for Individuals Aged 18 and Over)" (CAFC 921).

IF YOU CURRENTLY POSSESS FIREARMS, YOU MUST APPLY TO RENEW YOUR LICENCE BEFORE THE EXPIRY DATE INDICATED ON YOUR CURRENT LICENCE.

### PLEASE NOTE

You must complete all sections of the form except for Section F - Fees. The fee to renew a firearms licence has been waived. An incomplete form will cause delays in processing your application.

- A firearms licence is valid for five (5) years.
- You do not need to renew your licence if you have lawfully disposed of all firearms in your possession, are not required to handle firearms for employment purposes and do not intend to obtain, transport, store or borrow firearms or obtain ammunition.

**IF YOU NEED ADDITIONAL SPACE**, list all information requested on a separate sheet of paper, add your name and licence number to the top of each sheet and attach the sheet to your application.

**IF YOU NEED HELP COMPLETING THIS APPLICATION FORM**, call 1 800 731-4000. Additional information and some application forms are also available on our Web site at *www.cfc-cafc.gc.ca*.

Mail your completed application form and all attachments to:

Central Processing Site P.O. Box 1200 Miramichi, NB E1N 5Z3 The following information explains certain parts of the form and will help you answer some of the questions. You should read the instructions as you fill in your form. If you are still unsure about a question, call 1 800 731-4000 for assistance.

### A - LICENCE INFORMATION

If you want to change the class of firearm you may possess and/or acquire you must apply for a new licence using the form "Application for a Possession and Acquisition Licence Under the *Firearms Act* (for Individuals Aged 18 and Over)" (CAFC 921).

### **B - PERSONAL INFORMATION**

### Boxes 4 a), b) and c)

Please do not use initials or nicknames. Your last, first and middle name must be written in full. Junior (Jr.) or Senior (Sr.) can only be used if they form part of your legal name. If Junior (Jr.) or Senior (Sr.) form part of your legal name, please provide a photocopy of an official piece of documentation issued by a municipal, provincial or federal government that bears your full name.

If you have legally changed your name, please provide a photocopy of the supporting documentation. For example if you have changed your name by marriage, please attach a photocopy of your marriage certificate to your application form.

### Box 4 e) Street and land location

If you live in a rural area and do not have an address with a street number and name, provide your rural address (for example: lot and concession number). If you live on a reserve, provide the reserve number, or if you live in an Inuit community, provide your house number, box number or lot number. If your legal land location is unavailable, please provide a general description of your home location, e.g. 2km east of route 6.

### **C - PERSONAL HISTORY**

All questions in Section C must be answered by all applicants.

### Non-Residents of Canada

If you are a non-resident of Canada you must obtain a letter of good conduct issued by your local or state police.



# Letter of Good Conduct Required for Non-residents of Canada Only

A letter of good conduct must be written in the English or French language on the police department's official letter head paper. Please attach the letter to your application form.

# D and E - INFORMATION ABOUT CURRENT AND FORMER CONJUGAL PARTNERS

Conjugal partner includes spouses and common law partners and all other persons with whom you live or have lived in a similar relationship within the last 2 years.

A spouse is a person to whom you are legally married. A common-law partner is a person who is living with you in a conjugal relationship, having so lived for a period of at least one year.

#### Boxes 7 and 8

The signature(s) of your current and former conjugal partner(s) is not legally required.

However, if their signature(s) is not provided, the Chief Firearms Officer has a duty to notify them of your application to renew your firearms licence.

CHECKLIST							
Before mailing your application, have you							
answered all questions?							
attached your photo to your application?							
attached a separate sheet of paper with additional information with your name and licence number if necessary?							
signed and dated the declaration?							

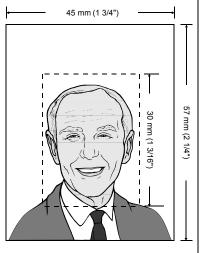
### PHOTO INSTRUCTIONS

You are not required to submit a passport type photograph or a photograph that has been taken by a professional photographer. However your photograph must meet the following criteria:

- Show a full front view of your head and shoulders.
- Use a plain, contrasting background without shadows.
- Do not wear a hat or sunglasses. Your eyes should be clearly visible and should not appear to be red.
- The photo should have been taken within the last twelve (12) months.
- Size: the photo should be no larger than 45 mm x 57 mm (1 3/4" x 2 1/4"). Your head in the photograph must be at least 30 mm (1 3/16") high.
- The photo must be original, not taken from an existing photo.
- Digitally produced photos are acceptable provided all other requirements are met.
- Cut the photograph to fit the size requirements before sending it to us.

### SIGNATURE INSTRUCTIONS

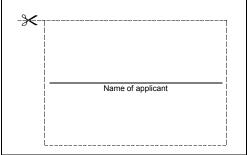
- Print and sign your name on the back of your photograph.



CAFC 1050 E V5 (2005/01/28)

### STICKER INSTRUCTIONS:

- Print your name on the label below.
- Cut and affix the label to the back of your photograph.
- Enclose the photograph with your application.



# **FEE WAIVER**

If you have previously held a firearms licence under the *Firearms Act*, do not enclose a fee.

The fee to renew a firearms licence has been waived.



### APPLICATION FOR RENEWAL OF A FIREARMS LICENCE FOR AN INDIVIDUAL

ATTENTION: Read the Information Sheet for exp	lanations. U	se an "X"	' to indicate your	answers (	where requ	ired). Print clearly in blu	e or black ink.	
A LICENCE INFORMATION								
Firearms licence number					e expiry date			
Class of firearm on current licence     a) Possession	(See the clas	ss of firear	m information on th	ne back of to b) Acquisi		licence card)		
B PERSONAL INFORMATION	(see Infor	mation S	heet)					
PERSONAL INFORMATION. Do not	use initials	or nickna	mes.					
4. a) Last name								
b) First name c) Middle name							d) Date of birth (Y / M / D)	
e) Street / Land location f) Apt. / Unit								
g) City	h) Province / Territory				i) Country		j) Postal code	
k) Daytime telephone number	Extension   I) Evening telephone number   Extension   m) E-Mail address (if applicable					L blicable)		
MAILING ADDRESS ☐ Check this b	ox if your ma	ailing addre	ess is the same as	your home	address.			
5. a) Street / Rural route / PO box nur	nber						b) Apt. / Unit	
c) City	d) Province / Territory				e) Country		f) Postal code	
C PERSONAL HISTORY (see	Informatio	n Sheet)						
If you answer <b>YES</b> to any of the queeach page you attach. If details are a A <b>YES</b> answer <b>does not mean</b> your	not provided,	your appli	cation cannot be p	rocessed.			cence number at the top of	
6. a) During the past five (5) years, h	ave you bee	n subject to	o a peace bond, pr	otection or	der or an ord	der under section 810 of th	Yes No	
b) Is any member of your househo	old prohibited	from poss	sessing any firearm	1?			Yes No	
c) During the past five (5) years, h by a medical practitioner for: de								
d) During the past two (2) years, have you experienced a divorce, a separation, a breakdown of a significant relationship, job loss or bankruptcy?								



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Please provide information on your conjugal partner.    Not applicable. I am not living with a spouse, common-law partner or any other conjugal partner.   7.a) last name of current spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.   If the signature of your current spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.   If YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.   Signature of spouse, common-law or other conjugal partners of spouse, common-law or other conjugal partners of spouse, common-law or other conjugal partners or powering in the last two (2) years (1) you need more space, list the information on a separate sheet of paper.   Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7; with whom you have lived in a conjugal relationship within the last two (2) years (1) you need more space, list the information on a separate sheet of paper.   Not applicable. I have not lived with a spouse, common-law or other conjugal partner is the last two (2) years (other than the person named in Box 7; with whom you have lived in a conjugal relation in the last two (2) years (other than the person named in Box 7; with whom you have lived in a conjugal partner were other conjugal partner in the last two (2) years (other than the person named in Box 7; with whom you have lived in a conjugal partner were other conjugal partner in the last two (2) years (other than the person named in Box 7; with whom you have lived in a conjugal partner were other conjugal partner.   Other than the person named in Box 7; with whom you have previously from the current address and/or telephone number of my former spouse, common-law or other conjugal partner.   Other than the person named in Box 7; with you have previously held a firearms licence u	D INFORMATION A	ABOUT CURRENT C	ONJUGAL PA	ARTNER	(see In	forma	tion SI	heet)				
7. a) Lest name of current spouse, common-law or other of your current spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.  IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.  9) Signature of spouse, common-law or other conjugal partner of pouse, common-law or other conjugal partner of pouse, common-law or other conjugal partner of pouse, common-law or other conjugal partner or other than the person named in Box 7, with whom you have lived in a conjugal residencially within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7, with whom you have lived in a conjugal residencially within the last two (2) years (other than the person named in Box 7).  8. a) Last name of former spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).  9. Apt. / Unit   I declare that I do not know the current address and/or telephone number of my former spouse, common-law or other conjugal partner.  9) Street / Rural route / PO Box number   Po Box n	Please provide information	on on your conjugal part	ner.									
If the signature of your current spouse, common-law or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.    FYOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.   Green provided of the signature of spouse, common-law or other conjugal partner   1) Date (Y / M / D)   Green provided of the signature of spouse, common-law or other conjugal partners. This includes any person, other than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years (ther than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years (ther than the person named in Box 7).	Not applicable. I a	ım not living with a sp	ouse, commor	n-law part	tner or a	ny oth	er conju	ıgal part	ner.			
the Chief Firearms Officer has a duty to notify them of your application.  IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.  Signature of spouse, common-law or other conjugal partner:    O Date (Y / M / D)		ouse, common-law or other	b) First name				c) Midd	dle name	:		d) Date of birth	(Y / M / D)
e) Signature of spouse, common-law or other conjugal partner    O Date (Y / M / D)   g) Telephone number and time when heighte may be contacted greening and information on your former conjugal partners. This includes any person, other than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).   A post paper of former spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).   A post paper of the series											l,	
Information and your former conjugal partners. This includes any person, other than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).  8.a) Last name of former spouse, common-law or other conjugal partner's first name   c) Date of birth (Y / M / D)	IF YOU HAVE ANY SAF	ETY CONCERNS ABO	UT THIS APPL	ICATION	, PLEASI	CALL	1 800 7	731-4000	).			
Provide information on your former conjugal partners. This includes any person, other than the person named in Box 7, with whom you have lived in a conjugal relationship within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).	e) Signature of spouse, o	common-law or other co	njugal partner	f)	Date (Y /	M / D)	<u> </u>	g) Tele	ohone numb	er and time who	1	☐ day
conjugal relationship within the last two (2) years. If you need more space, list the information on a separate sheet of paper.    Not applicable. I have not lived with a spouse, common-law or other conjugal partner in the last two (2) years (other than the person named in Box 7).    3. a) Last name of former spouse, common-law or other conjugal partner   b) Former spouse, common-law or other conjugal partner's first name   c) Date of birth (Y / M / D)     I declare that I do not know the current address and/or telephone number of my former spouse, common-law or other conjugal partner.   d) Street / Rural route / PO Box number   e) Apt. / Unit     f) City   g) Province / Territory     h) Country   i) Postal code	E INFORMATION AB	OUT FORMER CONJU	GAL PARTNE	R (see Inf	ormation	Shee	t)					
B. a) Last name of former spouse, common-law or other conjugal partner b) Former spouse, common-law or other conjugal partner's first name c) Date of birth (Y / M / D)    I declare that I do not know the current address and/or telephone number of my former spouse, common-law or other conjugal partner.   d) Street / Rural route / PO Box number   e) Apt. / Unit     f) City   g) Province / Territory     h) Country   i) Postal code											n whom you hav	e lived in a
I declare that I do not know the current address and/or telephone number of my former spouse, common-law or other conjugal partner.  d) Street / Rural route / PO Box number   e) Apt. / Unit    f) City   g) Province / Territory    h) Country   i) Postal code    If the signature of your former spouse, common-law partner or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.  IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.  j) Signature of former spouse, common-law partner or other conjugal partner   k) Date (Y/ M / D)   i) Telephone number and time when he/she may be contacted   Extension   day	Not applicable. I have	not lived with a spouse, co	ommon-law or oth	er conjuga	I partner i	n the las	st two (2)	years (oth	er than the p	person named i	n Box 7).	
d) Street / Rural route / PO Box number  f) City  h) Country  if the signature of your former spouse, common-law partner or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.  IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.  j) Signature of former spouse, common-law partner or other conjugal partner  k) Date (Y / M / D)  j) Telephone number and time when he/she may be contacted Extension   day evening   day evening   evenin	8. a) Last name of <b>former</b> spo	ouse, common-law or other co	onjugal partner	b) Former	r spouse, c	ommon-l	aw or oth	er conjuga	l partner's fi	rst name	c) Date of birth	(Y / M / D)
f) City    1) Postal code   2) Province / Territory   3) Postal code   3 Province / Territory   4 Province / Territory   5 Province / Territory   6 Province / Territory   7 Province / Territory   1) Postal code   10 Postal code   10 Indicate method of payment. Do not send cash. Make cheque or money order payable to Receiver General for Canada.   5 O O	I declare that I do	not know the current a	ddress and/or	telephor	ne numb	er of m	y forme	er spous	e, commo	on-law or otl	her conjugal pa	rtner.
If the signature of your former spouse, common-law partner or other conjugal partner is not provided, the Chief Firearms Officer has a duty to notify them of your application.  IF YOU HAVE ANY SAFETY CONCERNS ABOUT THIS APPLICATION, PLEASE CALL 1 800 731-4000.  j) Signature of former spouse, common-law partner or other conjugal partner   k) Date (Y / M / D)   1) Telephone number and time when he/she may be contacted   day   evening   day   evening   ev	d) Street / Rural route / F	O Box number								e) Apt. / L	Jnit	
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i) Signature of former spouse, common-law partner or other conjugal partner   k) Date (Y/M/D)   l) Telephone number and time when he/she may be contacted Extension   day evening   day	If										ided,	
FEES If you have previously held a firearms licence under the Firearms Act, do not enclose a fee.  Check this box if a fee waiver applies to you. (see Information Sheet)  9. Fee enclosed \$ 0.00  Cheque Certified cheque Money order Visa MasterCard If paying by credit card, complete this section.  I authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 9.	IF YOU HAVE ANY SAF	ETY CONCERNS ABO	UT THIS APPL	ICATION	, PLEASE	CALL	1 800 7	731-4000	).			
Check this box if a fee waiver applies to you. (see Information Sheet)  9. Fee enclosed  \$ 0.00	j) Signature of former spouse,	common-law partner or othe	r conjugal partner	k)	Date (Y / M	I / D)	 	I) Telep	hone numbe	er and time whe		day day
9. Fee enclosed  \$ 0.00  Cheque Certified cheque Money order Visa MasterCard  If paying by credit card, complete this section.  I authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 9.	F FEES If you have	ve previously held a	firearms lice	ence und	der the <i>l</i>	Fireari	ms Act	t, do no	t enclos	e a fee.		
\$ 0.00	Check this box if a f	ee waiver applies to you	u. (see Informat	ion Sheet	t)							
If paying by credit card, complete this section.  11. Credit card number  12. Expiry date  13. Name appearing on credit card section.  1 authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 9.	9. Fee enclosed	10. Indicate method of	f payment. <b>Do ı</b>	not send	cash. Ma	ake che	eque or r	money o	rder payab	ole to <b>Receiv</b>	er General for C	anada.
Card, complete this section.  I authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 9.	\$ 0.00	Cheque	Certified of	heque		Money	order		Visa	Ma	sterCard	
	card, complete this	11. Credit card numbe	er 	-	.		12. Exp	iry date	13. Nan	ne appearing	on credit card	
Cardholder's signature  Date (Y / M / D)	I authorize the Canada F	irearms Centre to charg	je to my credit o	card the a	mount sh	own in	Box 9.		1			
	_	(	Cardholder's sig	nature				Ш	Date (Y /	<u>                                     </u>		

### G APPLICANT DECLARATION

It is an offence under section 106 of the <i>Firearms Act</i> to knowingly make a false or n knowingly fail to disclose relevant information, for the purpose of obtaining a licence.	nisleading statement, either orally or in writing, or to
I declare that the information provided on this form and any attachment(s) is true and corre enclosed is of me.	ct to the best of my knowledge and that the photograph
Applicant's signature	Date (Y / M / D)

Information contained in this application is obtained under the authority of the *Firearms Act*. The information will be used to determine eligibility and to administer and enforce the firearms legislation. In addition to the provisions outlined in the *Firearms Act*, individual rights regarding personal information are governed by the applicable federal, provincial or territorial legislation relating to access to information and privacy.