

FORM 7

Application for Registration in the Register of Non Restricted Firearms Dealers

FIREARMS ACTS, 1925 TO 2008

NOTE: No Building Work is to be carried out on the Premises until the Applicant is contacted in writing by the Department of Justice and Equality. This form when completed must be lodged with the Sergeant of the Garda Síochána for the Sub-District in which the applicant resides

1	Name	
2	Home Address	
3	Date of Birth	
4	Telephone No	
5	Address of premises where business of firearms dealer will be conducted	
6	What business, if any, is already conducted at the premises?	
7	Do you wish to deal in (please tick): (a) firearms and ammunition <input type="checkbox"/> OR (b) ammunition only* <input type="checkbox"/> *sale & purchase of ammunition for shotguns, unrifled airguns & rifled firearms of a calibre not exceeding .22 inches	
8	Maximum number of cartridges you propose to store	

To the Minister for Justice and Equality,

I intend to conduct on the business of firearms dealer at the premises mentioned in part 5 above and I hereby apply to you for registration in the register of firearms dealers

Signature: _____

Date: _____