Firearms and Explosives Office Form No. 5 (Revision_October 2022)



FIREARM REGISTRATION APPLICATION FORM

(Purchase)





(Not Valid for Light Weapon) TYPE OF LICENSE: □TYPE 1 TYPE 2 ☐TYPE 3 ☐TYPE 4 TYPE 5 OTHER LICENSE/S: Sports Shooter Antique Firearm Collector Gun Collector Month Day DATE: PERSONAL INFORMATION Last Name First Name/s Middle Name Qualifier: Citizenship E-Mail Address Day Date of Birth Gender: M F Mobile Number Tin Landline Number: Firearm Residence Unit No./Bldg Street/Brgy City/Municipality Province Postal Code Region Firearm Information Dealer's Name MAKE MODEL **CALIBER** KIND SERIAL NUMBER CERTIFICATION AND UNDERTAKING I hereby certify that, pursuant to the provisions of Republic Act 10591, all statements provided herein are true and correct. Further, I certify that I have not been convicted of any crime involving moral turpitude, nor have I been convicted or am currently an accused in a pending criminal case for a crime that is punishable with a penalty of more than two (2) years. Any misdeclaration/fraud stated in this application and the attached documentary requirements shall be a basis for the cancellation of my license and the revocation of the registration/s of my firearm/s and its/their eventual confiscation without prejudice to the filing of criminal and/or civil charges against me.

Signature above Printed Name	
_ , , ,	ant exhibited to me o.
Doc. No.: Page No.: Book No.: Series of 20	
NOTARY PUBLIC	

Firearms and Explosives Office Form No. 7 (Revision_October 2022)



FIREARM REGISTRATION APPLICATION FORM (Renewal)



(Not Valid for Light Weapon)

	LICENSE		☐TYPE 2 hooter ☐ Ar	_	_	4 TYPE	
				DAT	Month	Day Y	ear
	PERS	SONAL INFOR	MATION				
Last Name	: 🔲						
First Name/s	: 💷						
Middle Name	: 🗆				Qualifier:		
Citizenship	: 🔲						
E-Mail Addres (Used in Feo-System.co	SS : Month	Day Year					
Date of Birth	: 🔲 /] Gei	nder : M	F		
Mobile Numb	er : 🔲		☐ Tin	: 🗆 🗆	-	-	
Landline Num	nber:						
Firearm Resid	dence						$\overline{}$
Unit No./Bldg	:		++++	++++			+
Street/Brgy		 	++++	++++			+
City/Municipali Province	ity :	 	++++	++++			+
Region		 	 	++++	Po	stal Code	+
region							
Firearm Inform	nation						
Firearm Inform	nation <i>MAKE</i>	MODE	<u>E</u> L	CALIBER	SER	NAL NUMBER	
		MODE	<u>EL</u>	CALIBER	SER	NAL NUMBER	
		MODE	<u>EL</u>	CALIBER	SER	NAL NUMBER	
		MODE	ΞL	CALIBER	SER	NAL NUMBER	
		MODE	<u>E</u> L	CALIBER	SER	PIAL NUMBER	
		MODE	EL .	CALIBER	SER	PIAL NUMBER	
I hereby certify that I have no criminal case for a crattached documentar	y certify that, pursua t been convicted of rime that is punishat		ON AND UNDE epublic Act 10591, a al turpitude, nor hav e than two (2) year ellation of my licens	RTAKING all statements provice I been convicted s. Any misdeclaratie and the revocation	ided herein are	e true and correct. F tly an accused in a p d in this application	ending
I hereby certify that I have no criminal case for a cr attached documentar its/their eventual conf	y certify that, pursua t been convicted of rime that is punishall ry requirements shall fiscation without prej	CERTIFICATION TO THE PROPERTY OF THE PROPERTY	ON AND UNDE epublic Act 10591, a all turpitude, nor have than two (2) year ellation of my licens nal and/or civil char above Printe me this da	RTAKING all statements provice I been convicted s. Any misdeclaration and the revocation ges against me. d Name y of	ided herein are d or am curren ion/fraud state on of the regis	e true and correct. Fi tly an accused in a p d in this application tration/s of my fiream	pending and the m/s and

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Firearms and Explosives Office Form No. 6 (Revision_October 2022)



FIREARM REGISTRATION APPLICATION FORM (Transfer) (Not Valid for Light Weapon)



TYPE OF LICE	NSE: [TYPE 1 🔲	TYPE 2	TYPE 3	TYPE	4 □TYPE 5
OTHER LICENS	SE/S:	Sports Shoot	er 🗌 An	itique Firearm	Collector [Gun Collector
	PERSON	IAL INFORMA	TION	DAT	E: Month	Day Year
Last Name : First Name/s : Middle Name : Citizenship : E-Mail Address : Cused in Feo-System.com) Date of Birth : Mobile Number : Landline Number : Tirearm Residence Unit No./Bldg : Citizenship : Ci	Month Day				Qualifier:	-
Street/Brgy : City/Municipality : Province : Region :					Post	al Code
Firearm Information Source:	Last Name First Name Middle Name Juridical Mobile No.:					
KIND MAK	Œ	MODEL		CALIBER	SERIA	AL NUMBER
I hereby certify that certify that I have not been convictional case for a crime that is attached documentary requirements its/their eventual confiscation with	icted of any cri punishable with ents shall be a b	me involving moral turp n a penalty of more than basis for the cancellation	c Act 10591, a itude, nor hav i two (2) years n of my license	all statements provi e I been convicted s. Any misdeclarati e and the revocation	or am currently on/fraud stated	in this application and the
SUBSCRIBED his/her competent evide on 20 Doc. No.: Page No.: Book No.: Series of 20	ence of ident	Signature above PRN to before me thity issued by	his da	y of 2		

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Firearms and Explosives Office Form No. 3 (Revision_October 2022)



FIREARM REGISTRATION APPLICATION FORM



APPROVED/DISAPPROVED

(For Caliber 5.56 and/or 7.62 Small Arm/s) TYPE OF LICENSE: □TYPE 3 □TYPE 4 □TYPE 5 Sports Shooter Antique Firearm Collector OTHER LICENSE/S: Gun Collector Month Day PERSONAL INFORMATION DATE: Last Name First Name/s Middle Name Qualifier: Citizenship E-Mail Address Month Day Year Date of Birth Gender: M Mobile Number Tin Landline Number: Branch of Law Enforcement Agency Agency I.D or Employee Number Firearm Residence Unit No./Bldg Street/Brgy City/Municipality: Province Postal Code Region Firearm Information Dealer's Name: MODEL MAKE CALIBER SERIAL NUMBER KIND CERTIFICATION AND UNDERTAKING I hereby certify that, pursuant to the provisions of Republic Act 10591, all statements provided herein are true and correct. Further, I certify that I have not been convicted of any crime involving moral turpitude, nor have I been convicted or am currently an accused in a pending criminal case for a crime that is punishable with a penalty of more than two (2) years. Above indicated firearms are for my personal use. Any misdeclaration/fraud stated in this application and the attached documentary requirements shall be a basis for the cancellation of my license and the revocation of the registration/s of my firearm/s and its/their eventual confiscation without prejudice to the filing of criminal and/or civil charges against me. Signature above Printed Name SUBSCRIBED AND SWORN to before me this ___ day of_____ 20__applicant exhibited to me his/her competent evidence of identity issued by _____ , bearing ID No. on _____ 20_ Doc. No.: Page No.: Book No.: **NOTARY PUBLIC** Series of 20

Chief, Records Section, FLD Chief, FLD, FEO Chief, FEO



INDIVIDUAL APPLICATION FOR LICENSE TO OWN AND POSSESS FIREARM (New Application)



RIGHT THUMBMARK (Roll thumbprint from left to right)

TYPE OF LICENSE: TYPE 1 TYPE 2 TYPE 3 TYPE 4 TYPE 5 OTHER LICENSE/S: Sports Shooter Antique Firearm Collector Gun Collector								
	PERSONA	L INFORM	ATION	D	ATE: [Month D	ay	Year
Last Name : First Name/s : Middle Name : Citizenship : E-Mail Address (Used in Feo-System.com) Date of Birth : Mobile Number : Landline Number :	Month Day Area Code	Year	Ger] Tin	nder: M	Qualif	fier:		
Address Unit No./Bldg: Street/Brgy: City/Municipality: Province: Region: Next of Kin Qualifications	Last Name First Name Middle Name Mobile No.: Businessman Elected Official Others:	□ Professional □ Gov't. Offial	Private Em		-	Postal Co	P/AFP/OI	
	olving moral turpitud inal case for a crim declaration/fraud s shall be a basis for or civil charges aga	to the provision orrect. Further, de, nor have I be that is punisha stated in this arthe cancellation	ns of Republic I certify that I en convicted o ble with a pen application ar of my license	c Act 10591 I have not to am currentle alty of more alto attact the attact.	been ly an than ched	In White (Original pho No F	to I.D. Phote Backgrou Sto on phote Photocopy; Inned phot	und o paper;
SUBSCRIBED AND S his/her competent evidence of ic on Doc. No.: Page No.: Book No.: Series of 20	WORN to before me dentity issued by	this day of	20appli , bearing ID N	cant exhibited	to me			

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INDIVIDUAL APPLICATION FOR LICENSE TO OWN AND POSSESS FIREARM (Renewal Application)



MA		
TYPE OF LICE	ENSE: TYPE 1 TYPE 2 TYPE 3 TYPE 4 TYPE 5	
OTHER LICEN	NSE/S: Sports Shooter Antique Firearm Collector Gun Collector	
	DATE: Month Day Year DATE: / / /	_
Last Name : First Name/s : Middle Name : Citizenship : E-Mail Address : Used in Feo-System.com) Date of Birth : Mobile Number : Landline Number :	Month Day Year Gender: M F Tin :	
Address Unit No./Bldg: Street/Brgy: City/Municipality: Province: Region: Next of Kin	Last Name First Name Middle Name Mobile No.: Businessman Professional Private Employee Gov't. Employee PNP/AFP/Other LEAst Ret. Gov't. Employee Reserved AFP Ret. PNP/AFP/Other LEAst	
I hereby certificatements provided hereiconvicted of any crime involuced in a pending criminum (2) years. Any misodocumentary requirements	ify that, pursuant to the provisions of Republic Act 10591, all on are true and correct. Further, I certify that I have not been colving moral turpitude, nor have I been convicted or am currently an inal case for a crime that is punishable with a penalty of more than declaration/fraud stated in this application and the attached is shall be a basis for the cancellation of my license without prejudice for civil charges against me. Signature above Printed Name	
SUBSCRIBED AND States in the state of the st	SWORN to before me this day of 20applicant exhibited to me dentity issued by, bearing ID No	

NOTARY PUBLIC

RIGHT THUMBMARK (Roll thumbprint from left to right)