



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

DATE: [Month] / [Day] / [Year]

PERSONAL INFORMATION

Last Name, First Name/s, Middle Name, Citizenship, E-Mail Address, Date of Birth, Gender, Mobile Number, Tin, Landline Number

Firearm Residence: Unit No./Bldg, Street/Brgy, City/Municipality, Province, Region, Postal Code

Firearm Information: Dealer's Name

Table with 5 columns: KIND, MAKE, MODEL, CALIBER, 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...

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.:
Series of 20\_\_\_\_\_

NOTARY PUBLIC





# FIREARM REGISTRATION APPLICATION FORM



(Transfer)

(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

**DATE:**    Month    Day    Year  
                     /  /

### PERSONAL INFORMATION

**Last Name** :

**First Name/s** :

**Middle Name** :       **Qualifier:**

**Citizenship** :

**E-Mail Address** :   
(Used in Feo-System.com)

**Date of Birth** :  /  /       **Gender** :  M     F

**Mobile Number** :       **Tin** :  -  -

**Landline Number** :       Area Code

**Firearm Residence**

**Unit No./Bldg** :

**Street/Brgy** :

**City/Municipality** :

**Province** :

**Region** :       **Postal Code**

### Firearm Information

**Source** :

Last Name	<input type="text"/>
First Name	<input type="text"/>
Middle Name	<input type="text"/>
Juridical	<input type="text"/>

**Mobile No.:**

KIND	MAKE	MODEL	CALIBER	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**

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.: \_\_\_\_\_  
 Series of 20 \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

**FIREARM REGISTRATION APPLICATION FORM**  
 (For Caliber 5.56 and/or 7.62 Small Arm/s)

**TYPE OF LICENSE:**    TYPE 3    TYPE 4    TYPE 5  
**OTHER LICENSE/S:**    Sports Shooter     Antique Firearm Collector     Gun Collector

**PERSONAL INFORMATION**

**DATE:**     Month /  Day /  Year

Last Name :   
 First Name/s :   
 Middle Name :       Qualifier:   
 Citizenship :   
 E-Mail Address :   
(Used in Feo-System.com)

Date of Birth :  Month /  Day /  Year      Gender : M F  
 Mobile Number :       Tin :  -  -   
 Landline Number :  Area Code

Branch of Law Enforcement Agency :   
 Agency I.D or Employee Number :

**Firearm Residence**

Unit No./Bldg :   
 Street/Brgy :   
 City/Municipality :   
 Province :   
 Region :       Postal Code

**Firearm Information**

Dealer's Name :

KIND	MAKE	MODEL	CALIBER	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. 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.: \_\_\_\_\_  
 Series of 20 \_\_\_\_\_

\_\_\_\_\_ **NOTARY PUBLIC**

**APPROVED/DISAPPROVED**





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



TYPE OF LICENSE:  TYPE 1  TYPE 2  TYPE 3  TYPE 4  TYPE 5

OTHER LICENSE/S:  Sports Shooter  Antique Firearm Collector  Gun Collector

DATE: 

Month		/		/			Year

**PERSONAL INFORMATION**

Last Name :

First Name/s :

Middle Name :  Qualifier:

Citizenship :

E-Mail Address :   
(Used in Feo-System.com)

Date of Birth : 

Month		/		/			Year

 Gender :  M  F

Mobile Number :  Tin :  -  -

Landline Number :        
Area Code

Address

Unit No./Bldg :

Street/Brgy :

City/Municipality :

Province :

Region :  Postal Code

Next of Kin

Last Name	<input style="width: 100%;" type="text"/>
First Name	<input style="width: 100%;" type="text"/>
Middle Name	<input style="width: 100%;" type="text"/>

Mobile No.:

Qualifications

Businessman  Professional  Private Employee  Gov't. Employee  PNP/AFP/Other LEAs

Elected Official  Gov't. Official  Ret. Gov't. Employee  Reserved AFP  Ret. PNP/AFP/Other LEAs

Others: \_\_\_\_\_

**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 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.: \_\_\_\_\_  
 Series of 20 \_\_\_\_\_



\_\_\_\_\_  
**NOTARY PUBLIC**

**RIGHT THUMBMARK**  
 (Roll thumbprint from left to right)



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


**TYPE OF LICENSE:**     TYPE 1     TYPE 2     TYPE 3     TYPE 4     TYPE 5

**OTHER LICENSE/S:**     Sports Shooter     Antique Firearm Collector     Gun Collector

**DATE:**

Month	/	Day	/	Year

### PERSONAL INFORMATION

**Last Name** : 


**First Name/s** : 


**Middle Name** : 

								<b>Qualifier:</b>		

**Citizenship** : 


**E-Mail Address** : 


**Date of Birth** : 

Month	/	Day	/	Year

**Mobile Number** : 


**Landline Number** : 

Area Code									

**Gender** :     M     F

**Tin** :    

	-		-						

**Address**

**Unit No./Bldg** : 


**Street/Brgy** : 


**City/Municipality** : 


**Province** : 


**Region** : 

								<b>Postal Code</b>		

**Next of Kin**

<b>Last Name</b>										
<b>First Name</b>										
<b>Middle Name</b>										

**Mobile No.:**


**Qualifications**

Businessman     Professional     Private Employee     Gov't. Employee     PNP/AFP/Other LEAs

Elected Official     Gov't. Official     Ret. Gov't. Employee     Reserved AFP     Ret. PNP/AFP/Other LEAs

Others: \_\_\_\_\_

## 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 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.:** \_\_\_\_\_  
**Series of 20** \_\_\_\_\_

\_\_\_\_\_  
**NOTARY PUBLIC**

2" X 2" I.D. Photo  
In White Background  
(Original photo on photo paper;  
No photocopy;  
No Scanned photo)



**RIGHT THUMBMARK**  
(Roll thumbprint from left to right)