

Form 13
APPLICATION FOR ARMS/AMMUNITION DEALER'S LICENCE OR ITS RENEWAL
(reg. 14)
REPUBLIC OF BOTSWANA
ARMS AND AMMUNITION ACT
(Cap. 24:01)

(To be submitted to the Commissioner of Police in triplicate)

1. I,
(Full names in block letters)

ID No.....
of
aged hereby apply for arms/ammunition dealer's licence or renewal of
licence at
in the District of

2. I am the sole owner/agent of the business.

3. Name and address of business

Whether a wholesale or retail business
.....

Date

.....
Applicant's Signature

Fee paid: P

O.R. No.

Date Stamp:

.....
Licensing Officer

4. Commissioner of Police's remarks

.....
.....

Date Stamp:

.....
Commissioner of Police

The Minister's decision

.....

Date Stamp:

.....

Signature

Arms/Ammunition Dealer's Licence No.

Date