



(Police Form.335A)

No.....

Date.:

APPLICATION FOR THE ISSUANCE OF A GUN DEALERS LICENCE
[Law 113(I)/2004 Article 7]

To the Chief of Cyprus Police

I request that I be granted a license for the manufacture /import/repair/exchange or sale of firearms category D, arms /(other than firearms) and arms that are collector's items.

(1) Name (In full) / Company Name.....

(2) Date of Birth:

(3) Identity Card Number/Registration Number.....

Passport Number (for non residents of Cyprus).....

(4) Postal Address:

Street:Number.....

Postal Code.....Telephone Number (Residence).....

Mobile Telephone Number

(5) Address of premises for selling firearms:

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(6) Professional qualifications:.....

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Acting Representative: Name (in full)

Identity Card Number

Address

Date.....

Signature:

Note: The Application must be accompanied by an I.D

For Official use only

The application is approved / not approved.

Date:

Signature.....

On Behalf of the Chief of Police

Seal:

.....

Note: The approval must be sealed

Name, rank, number

Note: The approval must be sealed