Firearms Safety and Education New Zealand

New Zealand Museum Worker Licence

New or Renewal of Licence Application Form

Section 112, Arms Act 2026

Information Sheet

1. Use this form to apply or reapply (renew) for a Museum Worker licence.
2. You must ensure all sections are complete, otherwise your application will be further delayed.
3. If you need support: phone 0800 844 431 (04 499 2870) between 8:30am and 5pm, Monday to Friday.

Visit our website for more information: www.firearmssafety.govt.nz

Who can apply

To apply for a Museum Worker licence, you must:

- be 16 or over (have the permission of their parents or legal guardian)
- have not had a firearms licence revoked in the last 5 years
- not be a disqualified person from holding a firearms licence (under section 70 of the Arms Act 2026).

What you need to do

1. Complete this application form

Please ensure you read the following carefully before you begin your application for a Museum Worker licence. An incomplete form will cause delays in processing your application.

Download the application form to your computer or device and enter the information requested.

Important Note
Do not use an Internet browser or Apple's Preview application to open this form. Please save the form to your device and open it using Adobe Acrobat Reader. If the form is completed using a browser, the entered information may be lost if you click on the 'back' button or if you try to save it.

Print out and sign the completed form or print out a blank form and handwrite your responses.

2. Pay the fee

Pay the application fee at a New Zealand PostShop and obtain a receipt to include with your application. There are separate fees for a Museum Worker licence application form.

3. Get the required documents

Please include the following alongside your application form:

- a copy of the PostShop receipts of your licence application and/or renewal
- two identical passport style photos (see the Proof of Identity - Photographs section of this application form)
- copies of the documents that prove your identity (see the Proof of Identity section of this application form) and a document confirming your current residential address
- copies of other required documents, such as the letter from your accountant or other documents as indicated in the application form.

4. Submit your application to Firearms Safety and Education New Zealand

Submit your printed application form and required documentation via courier to: National Services Team, Firearms Safety and Education New Zealand, Level 3, 210 Federal Street, Auckland 1010, New Zealand.

What you will need to apply

To assist you in the process, please ensure you read the following carefully before you commence your application for a new Museum Worker licence, or renewal of your Museum Worker licence. An incomplete form will cause delays in processing your application.

In your application, you will need to be able to:

- supply names and contact details for referees who will be interviewed by Firearms Safety and Education New Zealand as to your suitability to hold a Museum Worker licence,
- provide details of your Museum employer
- attend an interview with a member of Firearms Safety and Education New Zealand to discuss your suitability to hold a Museum Worker licence.

If you need more space than provided in each section of the application form, record the additional information in the appendices near the end of the form, noting the relevant section reference. If you need to attach documents or additional information to your application, please include your full name with each attachment.

If you need help completing this application form, please call the Registry and Services Team on 0800 844 431. Further information is available on our website www.firearmssafety.govt.nz.

What happens next

Once your application has been received, Firearms Safety and Education New Zealand will perform further checks in order to assess whether you are fit and proper to hold a Museum Worker licence.

When Firearms Safety and Education New Zealand are assessing whether you are a fit and proper person to have a Museum Worker licence, we will consider your overall character including information provided by you and your referees, as well as other information held or obtained by Firearms Safety and Education New Zealand.

This includes considering:

- whether you have the competencies and resources to carry on the Museum activity or activities for which the Museum Worker licence is sought,
- any convictions,
- whether you have knowledge of firearms and firearms safety,
- your understanding of the legal obligations of a holder of a Museum Worker licence and complying with all requirements of the Arms Act and Arms Regulations 2026,
- any other matters Firearms Safety and Education New Zealand considers relevant.

Identity Documents

You must provide a scan or clear photo of three documents:

- ◯ Proof of address dated within the last 3 months (e.g. bank statement or utilities bill with your name and address)

AND one of the following:

- ◯ New Zealand Passport
- ◯ Overseas Passport
- ◯ New Zealand driver licence
- ◯ Police identity card
- ◯ New Zealand Defence Force photo identification
- ◯ Kiwi Access Card (18+ Card)
- ◯ Identity document issued by New Zealand government

AND one of the following:

- ◯ Birth Certificate
- ◯ Citizenship certificate
- ◯ Permanent resident document
- ◯ Identity document issued by secondary or tertiary institution
- ◯ Educational records or certificates
- ◯ Professional or trade association membership certificate
- ◯ Other

Note: Do not send original documents. You must bring the original copies of these documents to your interview. All identity documents must be current, unless stated otherwise. Do not staple copies to other pages. If you are 16 or 17 and don't have the required documentation, you can request your parent or legal guardian to write a declaration to support your application.

After you submit your application

Firearms Safety Course

If this is the first time you have applied for a Museum Worker licence, or your licence expired more than 1 year ago - you will be contacted by our staff with how to book a firearms safety course. You must attend and pass this course before your application can progress.

If you're renewing a valid licence or a licence that expired less than a year ago, you do not need to attend a safety course. Instead, you will be tested during your interview on your knowledge of current firearms safety requirements in the Firearms Safety Code.

Interviews and storage check

Once we've received your application, Firearms Safety and Education New Zealand will carry out further checks to assess if you are fit and proper to possess firearms.

This includes:

- an interview to discuss your application
- interviewing your referee/s and Museum employer.

Receiving the decision

After we've assessed your application, you will receive a decision of approved or refused.
If your application is approved, you'll receive your approval letter.

Fees

Applicants for a Museum Worker licence or those applying to renew an existing current licence must pay the appropriate fee at the time of making the application.

Applicants are required to pay the Museum Worker licence application fee. For information on current fees, go to our website.

Licence duration

A new Museum Worker licence is valid for 5 years.

Firearms Safety and Education New Zealand

New Zealand Museum Worker Licence

New or Renewal of Licence Application Form

Please answer all questions in full or as not applicable ('n/a'). Incomplete answers may delay the processing of your application. Please write legibly if completing by hand.

Privacy Statement

The information you provide is collected for the purpose of administration of the Arms Act 2026, to enable the Firearms Safety and Education New Zealand to carry out its lawful functions. Firearms Safety and Education New Zealand will manage the personal information collected in accordance with the provisions of the Arms Act 2026 and the Privacy Act 2020.

Firearms Safety and Education New Zealand may share information with other agencies, (including Police for their lawful functions) consistent with the law, and where applicable, specific information sharing agreements. You can find more information about how Firearms Safety and Education New Zealand manages personal information on our website.

Section A: Licence Application

- ◯ **A1. I have never had a firearms licence**
- ◯ **A2. I have previously been refused a firearms licence**
- ◯ **A3. My firearms licence has expired**
- ◯ **A4. My firearms licence has been revoked**
- ◯ **A5. I surrendered my firearms licence**

Section B: Personal Information

Personal Details

B1. First name

B2. Middle name(s)

B3. Last name

B4. Date of Birth

B5. Gender

◯ Male ◯ Female ◯ Gender diverse

B6. Maiden name

Contact Details

B7. Driver licence number

B8. Mobile phone

B9. Email address

B10. Alternative phone

B11. Place of birth

Section B: Personal Information

B12. Home address
Number and street

Suburb

Town/City

Postcode

B13. How long have you lived here?

From

To

B14. Previous home address (if you have lived less than 5 years at current address, including overseas addresses)
Number and street

Suburb

Town / City

Postcode

B15. How long have you lived here?

From

To

B16. Postal address (if different from home address)
Number and street

Suburb

Town / City

Postcode

B17. What is your residency status?

- ◯ Citizen / permanent resident
- ◯ Visa holder - Type of visa (e.g. work, student)
  (do not use this form to apply for a visitor licence)

Expiry date of visa

Section C: Employment / Education Details

Please provide details of the Museum Employer you currently work for.

C1. Museum name

C2. What is your role / position and what do you do at work?

C3. How long have you worked there? (Years and Months)

C4. Museum business address

Number and street

Suburb

Town / City

Postcode

Current educational facility / school details

C5. Have you studied at an educational facility / school in the last three years?

◯ No ◯ Yes **Note:** If 'Yes' please provide details of the current, or most recent educational facility / school.

C6. Educational facility / school name

C7. Course name

C8. How long have you studied there? (Years and Months)

C9. Educational facility / school address

Number and street

Suburb

Town/City

Postcode

Section C: Employment / Education Details

Museum licence holder / Employer details

Please provide details of the Museum Licence holder / Employer you currently work for. The Museum Licence holder / Employer must be available for an interview.

C10. First name

C11. Middle name(s)

C12. Last name

C13. Museum licence number

Note: Enter Dealer licence number, if it is still active

Expiry Date

Contact Details

C14. Mobile phone

C16. Email address

C17. Alternative phone

This has been deliberately left blank.

Section D: Reasons for a Museum Worker licence

The following questions cover your experience with firearms and your reasons for wanting to hold a Museum Worker licence in New Zealand.

D1. Why do you want a Museum Worker licence?

D2. What are your obligations as a museum worker in regard to the safety and security of firearms?

D3. Describe the museum and explain the relevance of the firearms collection.

D4. Describe your experience with firearms (if any) and your knowledge on the safe handling of firearms. (Including but not limited to: locations, how often, who with, your earliest and most recent experiences, etc).

Section E: Personal History

In order to be considered for a Museum Worker licence you must provide detail of any criminal offending you have been involved with, now or in the past.

Note that the Criminal Records (Clean Slate) Act 2004 requires you to state whether you have a criminal record when applying for a Museum Worker licence (because of an exception to the Clean Slate scheme). Read more about the Clean Slate scheme on the Ministry of Justice website.

If you answer 'Yes' to any of the questions in this section, please provide details in the space provided below. If details are not provided, it may delay the processing of your application.

A 'Yes' answer does not mean your application will be refused but it may lead to further examination.

	No	Yes
Are you currently charged with or have you ever been convicted of any offence under the Arms Act 1983 or the Arms Act 2026?	○	○
Are you currently charged with or have you ever been convicted of any offence in New Zealand or overseas (including, but not limited to, an offence involving violence, drugs, or alcohol)?	○	○
Are you currently charged with or have you ever been convicted of an offence against any of - section 231A of the Crimes Act 1961; or the Game Animal Council Act 2013; or the Wildlife Act 1953; or the Wild Animal Control Act 1977?	○	○
During the past five years, have you been deemed not fit and proper to possess or use firearms?	○	○
Do you have, or have you had at any time had, a Protection Order or Temporary Protection Order made against you under the Family Violence Act 2018; or the Domestic Violence Act 1995; or a restraining order made against you under the Harassment Act 1997?	○	○
Do you belong to, or associate with, a gang or an organised criminal group, or any individual who does have gang or organised criminal group affiliations?	○	○
Have you been involved with or provided funding for a designated terrorist entity or extremist group?	○	○
Do you engage in any activities, including online activities, in groups or forums which exhibit, encourage, or promote violence, hatred or extremism?	○	○
Have you ever come to the attention of Police for any other matter, including traffic offences or infringement notices, in New Zealand?	○	○

Note: If you answered 'Yes' to any of the above questions, please provide details.

If you need more space, include your details in the Additional Space section and reference this section.

Section E: Personal History

E1. Please list any countries you have travelled to or lived in that involved a stay of a period of 14 days or more at any one time over the previous five years, with the total time visiting or resident in each such country.

Country	Total time

If you need more space, include your details in the Additional Space section and reference this section.

E2. Have you stayed in any country (other than New Zealand) for more than six months in total (not necessarily consecutive) in the previous 10 years?

◯ No ◯ Yes

If you have stayed in any country other than New Zealand for six months or more (not necessarily consecutive) within the last 10 years, you must provide a criminal record check for each country, at your own expense, with your application.

The criminal history check must not be dated older than two months from the date of your application for a New Zealand Firearms Licence.

You can find contact details for various countries and how they issue criminal record checks on Immigration New Zealand's website.

Note: If you answered 'Yes' please fill out the table below and provide the countries and relevant dates.

Country	Dates

Overseas Licences

E3. Have you ever been refused a firearms licence, firearms permit or an equivalent certificate to possess or use firearms in a country other than New Zealand?

◯ No ◯ Yes **Note:** If 'Yes', please provide full details of the refusal.

Section E: Personal History

E4. Have you been granted a firearms licence, a firearms permit, or an equivalent certification to possess or use firearms overseas?

◯ No ◯ Yes

E5. If you answered 'Yes' to question E4, has that licence, permit or certification subsequently been suspended, revoked or cancelled?

◯ No ◯ Yes **Note:** If 'Yes', please provide full details of the suspension, revocation, or cancellation.

Section F: Health Details

The following questions are asked so that we can understand if you and others will be safe if you have access to firearms. A 'Yes' answer does not mean your application will be refused but it may lead to further examination.

If you answer 'Yes' to any of the questions in this section, you will be asked to provide details. You will also need to attach certificate(s) from your health practitioner which are related to the condition.

Certificate(s) should state the nature of the health condition, whether it has been resolved, any on-going treatment, and whether they believe (having considered the interests of the safety of individuals, including yourself, or the public) you are a suitable person to use or possess a firearm, including if there are any limitations to possession or use that may be warranted.

Health background
Please tell us if you are receiving, or have received in the past two years treatment or counselling for, or suffer from:

F1. Mental illness of any kind, including depression, stress, anxiety, mental breakdown?

◯ Yes ◯ No

If 'Yes', please provide details (including dates) of illness, diagnosis and treatment, and your current condition.

Section F: Health Details

F2. Decline in functioning of memory, thinking, understanding and judgement?

◯ Yes ◯ No

If 'Yes', please describe the nature of this decline in function, when it started, and how it affects you now.

F3. Substance abuse or dependency (including drugs or alcohol)?

◯ Yes ◯ No

If 'Yes', please describe this substance abuse.

F4. Exhibiting behaviour suggesting anger or violence (including family harm)?

◯ Yes ◯ No

If 'Yes', please describe this behaviour and when it occurred.

F5. Drowsiness or problems with memory and thinking caused by illness or medication?

◯ Yes ◯ No

If 'Yes', please describe these problems and what causes them and how you manage them.

Section F: Health Details

F6. Seizures, dizziness or blackouts?

◯ Yes ◯ No

If 'Yes', please give details of the seizures, dizziness or blackouts including dates, treatment and if you are on medication or receiving other treatment to address this issue.

F7. Serious head injury or neurological disorder of any description or kind, which has lasting effects?

◯ Yes ◯ No

If 'Yes', please provide details of the injury or disorder including date and effect on you and whether you are receiving any treatment to address this issue.

F8. Have you thought about, threatened, or attempted suicide or self-harm in the past two years?

◯ Yes ◯ No

If 'Yes', please describe. When did this occur? What were the circumstances and what led to those thoughts, threat or attempt? Is or are the event(s) that led to these thoughts resolved? Are you receiving any relevant treatment?

F9. During the past two years, have you experienced significant life events such as the death of a person you were close to, divorce, separation, breakdown of a significant relationship, job loss or bankruptcy?

◯ Yes ◯ No

If 'Yes', please give details of the event and when it occurred.

Section F: Health Details

F10. Do you consume alcohol?
◯ Yes ◯ No

F11. Do you consume recreational drugs?
◯ Yes ◯ No

Note: If you answered 'Yes' to either of the above questions, please describe how often and how much at a time.

Section G: Next of Kin Referee

This referee must be available for an interview. If your referee is based in New Zealand, they must be available for an interview.

Your next of kin referee must be aged 16 or over.

- Your referee does not have to be a firearms licence holder or have seen you handle a firearm.
- If your referee lives overseas, you must also nominate an additional referee who lives in New Zealand and knows you well.
- They must be your spouse or partner (if you are married, in a civil union or a de facto relationship).
- If no spouse or partner, then the next of kin must be a near relative such as parents, step-parents, grandparents, or siblings. They must know you well enough to attest to your character, not necessarily your firearms experience.

G1. What is their relationship to you
◯ Spouse ◯ Partner ◯ Parent or legal guardian ◯ Sibling
◯ Close relative ◯ Close associate

G2. Does this next of kin referee live overseas?
◯ Yes ◯ No

G3. First name

G4. Middle name(s)

G5. Last name

G6. Does this referee have a New Zealand Firearms Licence or a New Zealand Driver Licence?
◯ Yes ◯ No

If 'Yes' please provide licence numbers below. If 'No', continue to Gender question.

New Zealand Firearms Licence number

New Zealand Driver Licence number

Please provide the following information so that we can properly identify this referee.

G7. Gender
◯ Male ◯ Female ◯ Gender diverse

G8. Maiden / other names used

G9. Date of birth

G10. Place of birth

Section G: Next of Kin Referee

Contact Details

G11. Mobile phone (including country code)

G12. Email address

G13. Alternative phone (including country code)

G14. Next of Kin referee home address

Number and street

Suburb

Town / City

Postcode

Referee relationship details

G15. How long have you known this person? (Years and Months)

G16. Tell us how well you know this person and why they are a suitable referee to attest to your character?

For example, tell us about your relationship and shared interests.

G17. How often do you see this person?

- ◯ Daily
- ◯ Fortnightly
- ◯ Less than once a month
- ◯ Monthly
- ◯ Weekly

G18. How do you typically meet and connect with this person? Choose all that apply

- ◯ In-person - hunting / club range
- ◯ In-person - visiting / socialising
- ◯ Phone calls / video calls
- ◯ In-person - living at the same address
- ◯ Other, online
- ◯ Social media
- ◯ Other, please describe platform

G19. When did you last meet with them?

Section G: Next of Kin Referee

G20. Select the most frequent method and contact

- ◯ In-person - hunting / club range
- ◯ In-person - visiting / socialising
- ◯ Phone calls / video calls
- ◯ In-person - living at the same address
- ◯ Other, online
- ◯ Social media
- ◯ Other, please describe platform

G21. How would you describe your relationship with this referee to another person?

Declaration regarding this referee

G22. I have confirmed with my referee that they are willing to be a referee for me.

◯ Yes ◯ No

G23. I have obtained my referee's authorisation for the Firearms Safety and Education New Zealand to check information about them, to assess their suitability to be a referee.

◯ Yes ◯ No

G24. I have confirmed with my referee that they will make themselves available for an interview, within a reasonable time of being requested.

◯ Yes ◯ No

Section H: Unrelated Referee

This referee may be required for an interview, should Firearms Safety and Education New Zealand determine the need to.

Your Unrelated referee must be:

- aged 20 or over,
- know you well enough to attest to your character and fitness to work with firearms – this must be someone you've known and been in regular face-to-face contact with for a significant period of your life and at least 3 years.

Your Unrelated referee must not:

- be related to you (for example, not your parents, step parents, cousin, aunt or in-laws)
- live at the same address as you (for example, not your flatmate, lodger or boarder)
- be your current spouse or partner, a former spouse or partner within the past 5 years, or an otherwise related person
- be employed by Firearms Safety and Education New Zealand, or New Zealand Police.

H1. What is their relationship to you

◯ Friend ◯ Colleague ◯ Other, please describe

H2. First name

H3. Middle name(s)

H4. Last name

H5. Gender

◯ Male ◯ Female ◯ Gender diverse

H6. Maiden / other names used

H7. Date of birth

H8. Place of birth

Section H: Unrelated Referee

H9. Does this referee have a New Zealand Firearms Licence or a New Zealand Driver Licence?

◯ Yes ◯ No

If 'Yes' please provide licence numbers below. If 'No', continue to Contact Details.

New Zealand Firearms Licence number

New Zealand Driver Licence number

Contact Details

H10. Mobile phone (including country code)

H11. Email address

H12. Alternative phone (including country code)

H13. Unrelated referee home address

Number and street

Suburb

Town / City

Postcode

H14. How long have you known this person? (Years and Months)

H15. Tell us how well you know this person and why they are a suitable referee to attest to your character?

For example, tell us about your relationship and shared interests.

H16. How often do you see this person?

◯ Daily ◯ Fortnightly ◯ Less than once a month ◯ Monthly

◯ Weekly

H17. How do you typically meet and connect with this person? Choose all that apply

◯ In-person - hunting / club range ◯ In-person - visiting / socialising ◯ Phone calls / video calls

◯ In-person - living at the same address ◯ Other, online ◯ Social media

◯ Other, please describe platform

H18. When did you last meet with them?

Section I: Former Spouse / Former Partner

You must provide details of former spouses or partners you've had a relationship with at any time during the past five years (if you've been married, in a civil union or a de facto relationship).

If you have had more than one former spouse or partner within the past five years, include their details in the Additional Space section and reference this section. If you never had a spouse or partner within the past five years, please proceed to Section J.

If your referee is also a close associate, you must provide an additional unrelated referee. Please include their details and the reason for using a close associate in the Additional Space section and reference this section.

I1. First name

I2. Middle name(s)

I3. Last name

I4. Gender

◯ Male ◯ Female ◯ Gender diverse

I5. Maiden / other names used

I6. Date of birth

I7. Place of birth

I8. Does this referee have a New Zealand Firearms Licence or a New Zealand Driver Licence?

◯ Yes ◯ No

If 'Yes' please provide licence numbers below. If 'No', continue to Contact Details.

New Zealand Firearms Licence number

New Zealand Driver Licence number

Contact Details

I9. Mobile phone (including country code)

I10. Email address

I11. Alternative phone (including country code)

I12. Home address

Number and street

Suburb

Town / City

Postcode

I13. How long were you together? (Years and Months)

I14. When did you separate?

I15. How often do you see this person?

◯ Daily ◯ Fortnightly ◯ Less than once a month ◯ Monthly

◯ Weekly

Section I: Former Spouse / Former Partner

I16. How do you typically meet and connect with this person? Choose all that apply

- ◯ In-person - hunting / club range
- ◯ In-person - visiting / socialising
- ◯ Phone calls / video calls
- ◯ In-person - living at the same address
- ◯ Other, online
- ◯ Social media
- ◯ Other, please describe platform

I17. When did you last meet with them?

I18. How would you describe your ongoing relationship with this person?

Section J: Parent / Legal Guardian

For applicants 16 or 17 years of age only.

If you are 16 or 17 years old, you must provide the details of all your parents, step parents and legal guardians. If their details cannot be provided, include an explanation. If you need more space, add the details to the Additional Space section and reference this section.

J1. Do all of your parents or legal guardian(s) support this application?

◯ Yes ◯ No

If 'No', please provide an explanation

Parent/legal guardian 1 (if not already listed as Referee 1 – next of kin)

J2. First name

J3. Middle name(s)

J4. Last name

J5. Gender

◯ Male ◯ Female ◯ Gender diverse

J6. Maiden / other names used

J7. Date of birth

J8. Place of birth

J9. Does this referee have a New Zealand Firearms Licence or a New Zealand Driver Licence?

◯ Yes ◯ No

If 'Yes' please provide licence numbers below. If 'No', continue to Contact Details.

New Zealand Firearms Licence number

New Zealand Driver Licence number

Section J: Parent / Legal Guardian

Contact Details

J10. Mobile phone (including country code)

J11. Email address

J12. Alternative phone (including country code)

J13. Home address same as the applicant?

◯ Yes ◯ No

Note: If 'No', please provide their address details.

Number and street

Suburb

Town / City

Postcode

Parent/legal guardian 2 (if not already listed as Referee 1 – next of kin)

J14. First name

J15. Middle name(s)

J16. Last name

J17. Gender

◯ Male ◯ Female ◯ Gender diverse

J18. Maiden / other names used

J19. Date of birth

J20. Place of birth

J21. Does this referee have a New Zealand Firearms Licence or a New Zealand Driver Licence?

◯ Yes ◯ No

If 'Yes' please provide licence numbers below. If 'No', continue to Contact Details.

New Zealand Firearms Licence number

New Zealand Driver Licence number

Contact Details

J22. Mobile phone (including country code)

J23. Email address

J24. Alternative phone (including country code)

Section J: Parent / Legal Guardian

J25. Home address same as the applicant?

◯ Yes ◯ No

Note: If 'No', please provide their address details.

Number and street

Suburb

Town / City

Postcode

Section K: Checklist

To avoid delays to your application, you must check you've provided:

◯ All pages from the form with questions answered in full or as not applicable ('n / a')

◯ Identity documents (refer to information sheet)

◯ A receipt from NZ Post to confirm your payment

◯ Other supporting documentation (e.g. medical certificate and / or criminal records if applicable)

Section L: Declaration

Privacy Statement

The information you provide is collected for the purpose of administration of the Arms Act 2026, to enable the Firearms Safety and Education New Zealand to carry out its lawful functions. Firearms Safety and Education New Zealand will manage the personal information collected in accordance with the provisions of the Arms Act 2026 and the Privacy Act 2020.

Firearms Safety and Education New Zealand may share information with other agencies, (including Police for their lawful functions) consistent with the law, and where applicable, specific information sharing agreements. You can find more information about how Firearms Safety and Education New Zealand manages personal information on our website.

Please read the following statements and show your acceptance by ticking each box.

◯ **I have completed the form and provided all supporting documentation.**

◯ **I have confirmed my referees will be available for an interview.**

◯ **The information I have supplied for this application is true and correct (refer section 250 offence, Arms Act 2026).**

◯ **I am not a disqualified person from holding a firearms licence (under section 70 of the Arms Act 2026).**

◯ **I consent to Firearms Safety and Education New Zealand to make enquiries into if I am a fit and proper person and authorise any person or organisation approached by Firearms Safety and Education New Zealand to release or disclose all relevant information.**

Date of application

Signature

Additional Space

Please use this space to add any further comments or information and use the question number for reference.
E.g. I16

Additional Space

Please use this space to add any further comments or information and use the question number for reference.
E.g. I16