Notice of Surrender of Business Licence

Arms Act 2026, Section 140 and 142

Firearms Safety and Education New Zealand

1. Use this form to provide notice that you intend to or are surrendering your business licence or to surrender another person's business licence where they are not able to do so.
2. If you submit your Notice of Surrender of Business Licence online please deliver your licence card to a police station. If you submit your notice of surrender form at a police station you must hand over your business licence card at that time. If the surrender of your business licence is to take effect at a future date you must deliver your business licence card to Police on that date.
3. You must deliver your last 10 years' business book records to Firearms Safety and Education New Zealand when you finalise the surrender of your business licence. You can do this by:
    - submitting an electronic file of your records online with your notice of surrender, or
    - submitting a scanned copy (PDF) of your records with your notice of surrender to Firearms Safety and Education, or
    - delivering the hard copy records or a data file on a USB flash drive/thumb drive to a Police station.
4. If you need assistance with this form please get in touch with your local Arms Officer.

Privacy Statement

The information requested is collected for the purpose of administration of the Arms Act 2026. Firearms Safety and Education New Zealand will hold, store, use or disclose the personal information collected in accordance with the provisions of the Privacy Act 2020. This means that, where necessary, Firearms Safety and Education New Zealand may use or disclose your personal information to enable it to carry out its lawful functions, including prevention, detection, investigation and prosecution of offences. Please refer to our privacy page on our website for more information.

Section A. Licence holder details

A.1 **Business Name**

A.2 **Last name**

A.3 **First name**

A.4 **Middle names**

A.5 **Business licence number**

A.6 **Endorsements held**

A.7 **Firearms licence number**

A.8 **Endorsements held**

A.9 **Mobile phone**

A.10 **Email address**

Section B. Reason(s) for surrender of licence

B.1 **When is the surrender of your business licence to become effective?**

☐ Immediately; Or on

Date (dd/mm/yyyy)

Please describe the reason(s) for surrendering this business licence.

Section C. Disposal of arms items and ammunition

C.1 **Do you still have possession of arms items and ammunition that are held for the purposes of carrying on business?**

☐ No If 'No' please confirm below that all arms item and ammunition disposal transactions are detailed in the business book records you are delivering to Firearms Safety and Education New Zealand.

☐ Yes If 'Yes' describe your plans to dispose of the arms items and ammunition remaining in your possession at this time, within 3 months, including to which persons where known. Please note that you must remain a current firearms licence holder until the disposal of all arms items has been completed.

Section D. Employees

D.1 **Do you currently employ, or have you employed, any staff since the most recent renewal of your business licence who need to hold a firearms licence to assist in the running of your business?**

☐ No If 'No' proceed to Section E.

☐ Yes

D.2 **Please provide details for each of the people who worked or still work for the business.**

NOTE: If staff members will remain employed in the business after your involvement ends please complete the row(s) for these staff as follows: 'Still employed' - 'Yes'; and leave 'Date employment finished/finishing' blank.

Licence number	Full name	Still employed	Date employment finished/finishing dd/mm/yyyy
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	
		☐ No ☐ Yes	

Section E. Declaration

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

☐ I am surrendering my own business licence. If ticked, continue to the next declaration statement.

OR

☐ I am completing this form on behalf of the business licence holder. If ticked, please complete the following.

E.1 **Reason for surrender on behalf of the business licence holder**

☐ Deceased ☐ Health related ☐ Other, please describe

E.2 **Is the business licence holder aware of this action** ☐ No ☐ Yes

E.3 **Do you have Power of Attorney** ☐ No ☐ Yes

E.4 **Copy of Power of Attorney attached** ☐ Yes

☐ I confirm I am surrendering this business licence in accordance with section 140 of the Arms Act 2026 and understand that hereafter I will need to reapply for a business licence if I wish to take possession of arms items for the purpose of operating as a firearms business.

☐ I have attached, or undertake to deliver, all business transaction records for the firearms business covering the last ten years, or for the time the business has operated if less than ten years.

☐ The information I have supplied in this notice is true and correct.

☐ I understand it is an offence to supply details knowing them to be incorrect or misleading (section 250 of the Arms Act 2026).

☐ I consent to Firearms Safety and Education New Zealand making inquiries and authorise any person or organisation approached by Firearms Safety and Education New Zealand in this matter to release or disclose all relevant information.

If you have printed or handwritten this form, please sign below.
Otherwise if filled out electronically please print your full name.

Signature

Date (dd/mm/yyyy)

Section F. Firearms Safety and Education Use Only

Arms staff please read and complete the following:

☐ I confirm that I have reviewed the licence holder's notice of surrender of their business licence, and

☐ I have made any other enquiries as I have considered to be necessary.

Findings of any further enquiries conducted, and regarding the disposal of arms items and ammunition

Full name

Designation

QID

Date (dd/mm/yyyy)

Arms officer to complete the following:

Notes

Surrender of business licence actions completed ☐

Conditions applicable to the disposal of arms items held by the licence holder (if applicable)

Full name

Designation

QID

Date (dd/mm/yyyy)

Section G. Additional Space