

Send your completed application to Licensing & Regulation Division GPO box 2807 Melbourne 3001

Telephone (local call): 1300 651 645 E-mail: licensingregulation@police.vic.gov.au

Signature

Internet: www.police.vic.gov.au



**Enter Organisation Licence Number** 

Date of Application

## APPLICATION FOR A DISPLAY ORGANISER APPROVAL PERMIT

FIREARMS ACT 1996 (S91)

ORGANISATION DETAILS		
Organisation Name		
Applicants Name		
Position held in the Organisation sponsoring the ev		
Organisation Address		
•		Postcode
Telephone Numbers: Home		
POSTAL ADDRESS		
Postal Address		
	State	Postcode
EVENTS DETAILS		
Event Name		
Event Address		
Event Date Form/		/
Event Time From	Event Time To _	
Will the events be covered by Public Liability?	Yes No C	
Attachments to be provided:		
1. Provide written details of what arrangements he the venue.	nave been made for th	ne secure storage of the Firearms on display a
2. Provide written details of what arrangements h storage requirements by persons displaying fire		ne Organiser to ensure compliance with secure
3. Will persons displaying Firearms be provided comply with?	I with written advice	of the secure storage requirements they mus
If YES, please attach copy.		
If <b>NO</b> , why not and how will they be advised of store	age requirements?	
If insufficient space please attach further details.		

Applications Revised on 23/01/2012