

Post your completed application to:

Licensing & Regulation Division
 GPO Box 2807
 MELBOURNE 3001

Phone: 1300 651 645
 Email: lrđ@police.vic.gov.au
 Web: www.police.vic.gov.au



VICTORIA POLICE

**Instructions Pages
 for Personal Information Form
 accompanying a Prohibited Weapons Approval Application**

The information you supply in this form will be treated as Strictly Confidential

General Instructions for Completing this Form

Who should complete this form?

Every person listed in the Business Application for a Chief Commissioner's Prohibited Weapons Approval including:

- The Nominated Person, partner(s) and all other responsible persons of a Body Corporate. (e.g. the director, secretary, executive officers, close associates etc).
- Sole Traders
- Natural persons
- New employees - (Provide a letter current from your employer describing activities you are involved in).

This form should also be completed if there are any changes to a Body Corporate's Nominated Person, partners or employees after a Chief Commissioner's Prohibited Weapons Approval has been granted.

How do I complete this application?

- Each part of the application has a corresponding instruction page section. Please read the instructions carefully and provide the documents and evidence as requested to avoid any delay in the processing of your application.
- The form must be completed in black or blue pen **only**.
- Do not send original documents – send certified copies only.
- All documents must be certified as true copies of the original and must be of the highest quality as they are imaged and recorded. This means that these copies of your passport, Driver Licence, credit cards etc must have legible text and clear photos.
- Do not use liquid paper on the form or any supporting documentation.
- Attach supporting documentation to your application securely.
- Send the application and supporting documents to the address listed at the top of this instruction page.
- Licensing & Regulation Division can be contacted for assistance via email at lrđ@police.vic.gov.au or via telephone on 1300 651 654.
- Please print neatly in capital letters and do not cross or touch the lines or edges of the boxes.
- All dates must be entered in the DD/MM/YY format. For example, 14 / 07 / 70

CORRECT

B L U E

INCORRECT

B F U E

Printing text or numbers like this will result in processing delays.

Yes No Yes No

When you are asked to make a choice, place a cross in the box

Part 1 – Purpose of the Form

1. Place a cross in the box which describes your reason for completing this form.
2. Enter the name of the Body Corporate, Government Department or Licensed Firearms Dealer and (if known) the Firearm Licence / Approval Number.

Part 2 – Personal Information

Provide your current personal details in the boxes provided. Make sure to leave a space between words.

Previous name If you have ever changed your name, you must provide a certified copy of your change of name certificate **or** full birth certificate (including the schedule of any name changes) **or** marriage certificate.

Driver licence and email	You must provide your Driver's Licence number and email address where you have one. When entering your email address, record the exact address.
Contact details	Licensing & Regulation Division will use this information to contact you if a problem is encountered when processing your application.

Part 3 – Medical History

Simply cross “yes” or “no” in response to each question.
If you answer “yes” to any question, you must supply a medical report from your treating doctor indicating your suitability to hold a Chief Commissioner's Prohibited Weapons Approval.
Note: This medical report must state that you are a fit and proper person to be in possession of prohibited weapons.

Part 4 – Previous History

Offences	“Changes Pending” means formally charged with an offence which is currently awaiting a court appearance. In relation to “Found Guilty”, it does not matter how long ago you were found guilty or what penalty was imposed. If you answer “yes”, indicate the State and/or Country.
Family Violence Intervention Order	If you have been subject to a final (not interim) Intervention Order, you are required to indicate the year that you were subject to the order. You also have a right to apply to a court to be deemed not to be a Prohibited Person and you should indicate if you have done this. Attach a certified copy of the court extract if the court found you not to be a Prohibited Person.

Part 5 – Identification Reference

(If you hold a current Victorian Firearm or Private Security licence or a Chief Commissioner's Prohibited Weapons Approval, then you do not have to complete this part. Go to Part 6).

Identification

You are required to provide 100 points of identification to prove your identity. You must provide **certified copies** of one primary identification document **and** one or more secondary identification document(s) equal to, or more than 100 points (see the list below).

If you have ever changed your name, you must provide a **certified** copy of your change of name certificate **or** full birth certificate (including the schedule of any name changes) **or** marriage certificate.

Primary Identification (only one allowed)	Points	Secondary Identification (continued)	Points
Full Birth Certificate (or name change certificate)	70	Mortgage documents confirming current address	35
Current Passport	70	Land Titles Office record confirming current address	35
Passport which has not been cancelled and was current within the preceding 2 years	70	Bank or Credit Card Statement confirming current address	25
Australian Citizenship Certificate	70	Department of Veterans' Affairs Health Care Card	25
Diplomatic documents and official documents issued to refugees	70	Medicare Card	25
		Telephone Account	25
Secondary Identification		Credit Card	25
Public Service ID including photograph and/or signature	40	Statement from a primary, secondary or tertiary education institution (attended with the last 10 years) confirming date of birth	25
Any licence issued under Australian law including photograph and/or signature, e.g. Driver Licence	40	Membership records from a professional or trade association confirming date of birth	25
A Government issued ID showing entitlement to financial benefit including signature, e.g. Health Care Card issued by the Department of Human Services	40	Records of a Public Utility confirming current address, e.g. gas, electricity or water bill	25
ID Card issued by a tertiary education institution including photograph and/or signature	40	Confirmation of enrolment issued by the Australian Electoral Commission confirming current address	25
Records from an employer (with past 2 years) confirming current address, e.g. letter on company letterhead or a payment summary	35	Victorian Proof of Age Card. Note: Key pass is unacceptable.	25
	35	Rental agreement document confirming your tenancy of a property	25
Council rates notice confirming current address	35	Working with Children Check	25

This is an example of a secondary identification document that has been certified.



I certify that the document presented for certification is a true copy of the original. This document was sighted by me on:

21/12/2021

Signature: *J Person*
 Print Name: Jane A Person
 Type of Referee: Accountant

Part 5 – Identification Reference continued

Identification

You must ask the referee to:

- sign the copy of any identification documents to indicate that they are true copies of the original; and
- complete all required parts of the “Declaration by Referee” section in part 5 of the form; and
- witness you (the applicant) sign part 5 of the form.

Don't forget to staple/clip copies of the certified identification documents with your application form when you post it.

Referee

You need to ask one of the persons from the list below to be your referee. The referee must not be related to you by birth or marriage and must have known you for at least 12 months.

<p>A member of:</p> <ul style="list-style-type: none"> the Chartered Accountants Australia and New Zealand; or the Australian Society of Accountants; or the Institute of Public Accountants. 	<p>A member of a municipal, city, town, district or shire council of a State or Territory.</p>	<p>An employee of a financial institution who is authorised by the financial institution to open accounts with the institution.</p>
<p>An agent of a financial institution who is authorised by the financial institution to open accounts with the institution.</p>	<p>A full-time employee of:</p> <ul style="list-style-type: none"> a financial institution or a corporation that is a registered corporation within the meaning of the <i>Financial Sector (Collection of Data) Act 2001</i> who has been employed continuously for at least 5 years by one or more financial bodies. 	<p>An employee of a bank carrying on a business outside Australia</p> <ul style="list-style-type: none"> that does not have an authority under Section 9 of the <i>Banking Act 1959</i>; and that is engaged in a transaction with a cash dealer; who is authorised by the bank to open accounts with the bank.
<p>A full-time employee of a company carrying on insurance business who has been employed continuously for at least five years by one or more companies of that type.</p>	<p>A legal practitioner of a Federal, State or Territory Court.</p>	<p>A registrar, clerk, sheriff or bailiff of a Federal, State or Territory Court</p>
<p>An officer within the meaning of the <i>Defence Act 1903</i>.</p>	<p>An individual registered or licensed as</p> <ul style="list-style-type: none"> a dentist, a medical practitioner, a pharmacist, or a veterinary surgeon, <p>under a law of a State or Territory providing for that registration or licensing.</p>	<p>An individual who is employed and registered as a nurse under the law of a State or Territory providing for that registration.</p>
<p>A diplomatic or consular officer of an Australian Embassy, High Commission or Consulate, in Australia or overseas.</p>	<p>A holder of an office established by a law of the Commonwealth, a State or Territory in respect of which annual salary is payable.</p>	<p>A judge or master of a Federal, State or Territory Court.</p>
<p>A stipendiary magistrate of the Commonwealth or of a State or Territory.</p>	<p>A justice of the peace of a State or Territory.</p>	<p>A member of the Federal Parliament or a State Parliament.</p>
<p>A member of the Legislative Assembly of the Australian Capital Territory, the Northern Territory or Norfolk Island.</p>	<p>A minister of religion who is registered as a marriage celebrant.</p>	<p>A notary public.</p>
<p>A member of the Australian Federal Police, or of the police force of a State or Territory, who in the normal course of his or her duties, is in charge of a police station.</p>	<p>A member of the Australian Federal Police, or of the police of a State or Territory, of or above the rank of sergeant.</p>	<p>A manager of a post office.</p>
<p>An individual employed as an officer or employee by one or more of the following:</p> <ul style="list-style-type: none"> the Commonwealth, a State or Territory; an authority of the Commonwealth, a State or Territory; or a local government body of a State or Territory; <p>who has been so employed continuously for a period of at least five years, whether or not the individual was employed for part of that period as an officer and for part as an employee.</p>	<p>An individual employed as a full-time teacher or as a principal at one or more of the following educational institutions:</p> <ul style="list-style-type: none"> a primary or secondary school forming part of the education system in a State or Territory; or an institution listed in section 4 or paragraphs 34(4)(b)-(j) (inclusive) of the <i>Higher Education Funding Act 1988</i>; <p>who has been so employed continuously for a period of at least five years.</p>	<p>An individual who, in relation to an Aboriginal community</p> <ul style="list-style-type: none"> is recognised by the members of the community to be a community elder; or if there is an elected Aboriginal council that represents the community – is an elected member of the council.
<p>An individual who is an agent of a totalisator agency board if</p> <ul style="list-style-type: none"> the individual conducts an agency of the totalisator agency board at particular premises; and the agency is not ancillary to any other business conducted at those premises. 	<p>A Commissioner for oaths of a State or Territory.</p>	<p>An individual who is registered as a tax agent under part VIIA of the <i>Income Tax Assessment Act 1936</i>.</p>
<p>A member of the Chartered Institute of Company Secretaries in Australia Limited.</p>	<p>A member or fellow of the Association of Taxation and Management Accountants.</p>	<p>A member of the Institution of Engineers Australia, other than a member with the grade of student.</p>
<p>A fellow member of the National Tax and Accountants' Association Limited.</p>		

Part 6 – Fingerprints

Applicants must have their full set of fingerprints taken. Call 1300 881 596 between 8am and 4pm Monday to Friday to make an appointment (for both metropolitan and country applicants).

Part 7 – Acknowledgement

You must read, sign and date the Acknowledgement.

Post your completed application to:

OFFICIAL

Licensing & Regulation Division
GPO Box 2807
MELBOURNE 3001

VP Form 1399

Phone: 1300 651 645
Email: lrld@police.vic.gov.au
Web: www.police.vic.gov.au



VICTORIA POLICE

**Personal Information Form
accompanying a Prohibited Weapons Approval Application**

Part 1 – Purpose of Form

Cross the relevant box below:

This form must be completed by:

- Each person listed in a **new** Business Application for a Chief Commissioner’s Prohibited Weapons Approval.
- Any person who comes to use or be covered by this Business Chief Commissioner’s Prohibited Weapons Approval.

- | | |
|---|--|
| <input type="checkbox"/> Nominated Person – Body Corporate | <input type="checkbox"/> Change of Nominated Person – Body Corporate |
| <input type="checkbox"/> New responsible person – Body Corporate | <input type="checkbox"/> Change of responsible person – Body Corporate |
| <input type="checkbox"/> New natural person | <input type="checkbox"/> Change of natural person – Body Corporate |
| <input type="checkbox"/> New partner or sole trader | <input type="checkbox"/> Change of partner |
| <input type="checkbox"/> New employee
(Provide a current letter from your employer describing activities you are involved in). | |

Provide the name of the Body Corporate, Government Department, Licensed Firearms Dealer, Approved Club and (if known) Firearm Licence / Approval Number

(Name)	(Licence / Approval Number)
<input type="text"/>	<input type="text"/>

Part 2 – Personal Information

Current name

Family Name

First Given Name

Other Given Names

Date of Birth / / Sex: Male Female

Previous name

Have you changed your name in the past five years? Yes No

If you crossed “yes”, you must supply relevant documentation (e.g. marriage or change of name certificate).

Residential address

Property Name (if applicable)

Flat/Unit Number Street Number Lot Number

Street Name

Street Type

Town/Suburb Postcode State

OFFICIAL

Part 2 – Personal Information continued

Postal address (if different from residential address)

GPO Box PO Box Locked bag Private bag RMB RSD

Box/Bag number

Street name

Street type

Town/Suburb Postcode State

Driver Licence and contact details

Driver's licence number

(Work)

(Mobile)

Telephone (home)

(Mobile)

Email address

When providing your email address, please record the exact address.

Part 3 – Medical History

Do you currently have any medical or psychiatric conditions or impairments that may directly impact your ability to hold a licence, registration or approval for the reasons or activities being applied for or renewed? Yes No

Have you in the past five years been treated for:

Mental health conditions including, but not limited to, depression or stress? Yes No

Alcohol or drug-related problems? Yes No

Any other medical condition which could preclude you from obtaining a Chief Commissioner's Prohibited Weapons Approval? Yes No

A physical disability or any other medical condition (e.g. neurological, stroke or brain injury) which could impact your ability to hold a licence, registration or approval? Yes No

If you answered "yes" to any of the above, you must include a medical report from a doctor or psychologist who treated you, or is familiar with your condition, outlining your suitability of being a fit and proper person to be in possession of prohibited weapons.

Part 4 – Previous History (all applicants must complete **all sections** of this part)

Section 1: Offences

Have you ever been found guilty of, or do you have charges pending for, any offence in Australia or overseas? Yes No

If you answered "yes", in which state and country? State Country

Section 2: Approval refusal/cancellations

Have you ever been refused an approval for Prohibited Weapons? Yes No

Have you ever had an approval or exemption for Prohibited Weapons revoked? Yes No

Section 3: Family Violence Intervention Order

Have you ever been subject to a final (not interim) Intervention Order? Yes No Year

Section 4: Previous approval

Have you previously held an Approval for prohibited weapons? Yes No

If you answered "yes", in which state? State

Part 5 – Identification Reference

<p>Identification</p> <p>Do you have a current Victorian Firearms or Private Security Licence or CCP Weapons Approval? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answered 'yes', please provide your Licence Number. Then go to Part 6. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>If you answered 'no', you must provide 100 points of certified identification documents (including one form of primary identification and one or more secondary identification forms). See part 5 of the instruction pages for more information.</p>		
<p>Reference</p> <p>Declaration by Referee</p> <p>I, the Referee, declare that I have known <input style="width: 500px;" type="text"/></p> <p>by that name for a period of <input type="text"/> years and <input type="text"/> months and vouch for his/her identity.</p>		
<p>Signature by Applicant</p> <p>Applicant to indicate the type of identification documents being provided and sign in the presence of their referee.</p> <p>I, the applicant am providing the following certified identification documents: _____</p> <p>_____</p> <p>_____</p>		
Applicants signature	<input style="width: 95%;" type="text"/>	Date <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/>
<p>Declaration by Referee (continued)</p> <p>I, the referee, also certify that:</p> <ul style="list-style-type: none"> • the above details are true and correct; and • the applicant's signature above was completed in my presence; and • the identification documents I have signed are true copies of the originals. 		
Referee's signature	<input style="width: 450px;" type="text"/>	Date <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/>
<p>Referee's personal details</p> <p>Family name <input style="width: 350px;" type="text"/> Given name/s <input style="width: 280px;" type="text"/></p> <p>Address <input style="width: 770px;" type="text"/></p> <p>Category of acceptable referee (see instruction pages) <input style="width: 460px;" type="text"/></p> <p>Telephone (H) <input style="width: 200px;" type="text"/> (W) <input style="width: 200px;" type="text"/> (M) <input style="width: 200px;" type="text"/></p>		

Part 6 – Fingerprints

<p>Have you had your fingerprints recorded with Victoria Police?</p>	<p>Yes <input type="checkbox"/> Go to Part 7.</p> <p>No <input type="checkbox"/> Refer to Part 6 instruction pages.</p>
--	---

Part 7 – Acknowledgement

I acknowledge that the particulars in this application and any attachments are true and correct and I make this acknowledgement knowing that it is an offence against section 8E (2) of the *Control of Weapons Act 1990* to wilfully supply details that are false or misleading (maximum penalty 20 penalty units).

Signature:

Date:

Privacy Statement: The personal and health information requested is being collected and used by Victoria Police for the purposes of assessment of an application for a licence, registration, permit or approval. It will be used in accordance with relevant legislation, including the *Firearms Act 1996*, *Private Security Act 2004*, *Control of Weapons Act 1990*, *Health Records Act 2001* and the *Privacy and Data Protection Act 2014*. The information may be disclosed to employers, approved bodies and other statutory authorities for the purposes of law enforcement and the administration of justice. To gain access to personal and health information held by Victoria Police, you must apply in writing to the Freedom of Information Division of Victoria Police, at www.police.vic.gov.au.