



ISO NET (Pty) Ltd

We believe every client is unique...

Firearm Supportive Documentation for Motivations required for Office use

Company Reg.: 2017/211545/07
 E-mail: sanet@iso-net.co.za
 Website: <https://iso-net.co.za>
 Cell phone: 081 772 9339
 Address: 15 B Porter Avenue
 Brakpan 1541
 Gauteng

The following questions are of the utmost importance and needs to be answered honestly in order to avoid your application for a firearm of being refused and the possibility of a criminal case being instituted against you.

<p style="text-align: center;"><u>SUPPORTIVE DOCUMENTATION FOR MOTIVATIONS</u> DOCUMENTATION REQUIRED FOR OFFICE USE</p>		<p style="text-align: center;">Quotation Number:</p>		
CLIENT:				
DATE:		REQ	REC	NOTE
NECESSARY DOCUMENTATION / PROOF				
COPY OF ID IF ID CARD FRONT AND BACK (not certified)				
COPY OF SPOUSES ID & PHONE NUMBER				
COPY OF FRIENDS, MOTHER, FATHER, NEIGHBOR ID & PHONE NUMBER (if not married)				
TRAINING CERTIFICATE PROVIDER				
SAFE PHOTO (1x open & 1x closed) - WITH NO FIREARMS!! IN COLOUR				
PROOF OF RESIDENCE - LIGHT ACC ETC.				
COPY OF FIREARM LICENSES (if applicable)				
COPY OF COMPETENCY CERTIFICATE FROM SAP (if card front and back)				
HUNTING RIFLE OR SHOTGUN DOKUMENTATION / PROOF				
OWNERSHIP OF PROPERTY / FARM				
HUNTING INVITE				
HUNTING TESTIMONIAL / REFERENCE				
PHOTOS OF HUNTS				
MEAT/GAME PERMITS/HUNTING PERMITS/TRANSPORT PERMISSION				
LIST OF GAME HUNTED				
HUNTING MEMBERSHIP INFO / PROOF				
PROOF OF MEMBERSHIP				
DEDICATED CERTIFICATE				
DECLARATION OF HUNTERS ASS				
ENDORSEMENT NB!!!!!!				
SELF DEFENCE DOCUMENTATION / PROOF				



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STATEMENT FROM EMPLOYER/ OWEN BUSINESS ANY PROOF			
ACC FROM SECURITY COMPANY	(If alarm is monitored)		
ANY CASE NUMBERS FROM SAP	(If applicable)		
CRIME STATISTICS IN YOUR AREA / REPORTS /ARTICLES (if you have been involved in)			
PROOF OF TRAVELLING - PETROL & TOLL SLIPS OR LOG BOOKS			
<u>AFTER HOURS ACTICITIES DOCUMENTATION / PROOF</u>			
GYM			
CHURCH			
SPORT			
SCHOOL ACTIVITIES/PARENT EVENING			
<u>SPORT SHOOTING DOCUMENTATION / PROOF (Section 16)</u>			
PROOF OF MEMBERSHIP			
DEDICATED SPORT SHOOTING			
ENDORSEMENT NB!!!!			

NOTE: ONLY COMPLETE THE SECTION YOU ARE APPLYING FOR	
<u>PRIVATE PERSONS DETAILS – TO COMPLETE SAP271</u>	
PLEASE INDICATE WHAT TYPE OF APPLICATION APPLYING FOR:	
<input type="checkbox"/> SELF DEFENSE • <input type="checkbox"/> OCCASIONAL HUNTING • <input type="checkbox"/> DEDICATED HUNTING • <input type="checkbox"/> DEDICATED SPORT SHOOTING	
Title:	
Surname:	
Full Names:	
ID Number:	
Physical address:	
Town/City:	Postal Code:
Postal address:	



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Town/City:

Postal Code:

Home telephone number:

Mobile phone number:

Home email address:

EMPLOYMENT TYPE:

Trade of Profession (Occupation) :

If Self Employed please specify what your position in company and supply proof:

Name of Company:

Physical work address:

Town/City:

Postal Code:

Work phone number:

Work email address:

Work facsimile number:

PARTICULARS OF EXISTING COMPETENCY CERTIFICATE:

Indicate with X

Competency Certificate: Yes No

Handgun Rifle Shotgun Hand Machine Carbine

SAPS Competency Certificate Number: C

Current Firearm licenses on name: (If applicable)



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MARITAL STATUS:

Indicate with X

Single Married Divorced Widow Widower

Spouses ID Number :

Contact number:

Full names and Surname:

IF NOT MARRIED, DIVORCED, WIDOW OR WIDOWER:

FRIENDS/ FAMILY MEMBER STATUS:

Indicate with a X

Friend Mother Father Sister Brother Neighbor

ID Number :

Contact number:

Full names and Surname:

Physical address:

Town/City:

Postal Code:

TYPE OF RESIDENCE:

Indicate with X

House Flat Hostel Caravan Cottage Homeless Boat

SECURITY MEASURES:

Distance from Police Station:



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SECURITY MEASURES TAKEN AT HOME:

Indicate with X

Monitored Alarm Burglar Proofing Security Gates Security Guards

Electric Fencing Fencing Wall Dogs

Palisades Cameras Beams

SAFE DESCRIPTION:

Indicate with X

Rifle Safe Handgun Safe Strong Room Safe

Bolted to: Wall Floor Both

Other measures taken:

OTHER DETAILS:

Date of Marriage:

Number of Children living at home:

Anyone else living on property:

SELF DEFENCE APPLICATION

HOBBIES / AFTER HOURS ACTIVITIES

Indicate with X

Cycling Gym Fishing Water Sports Hunting

Quad Biking 4x4 Camping Soccer

Other:



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AFTER HOURS ACTIVITIES

Indicate with X and submit proof:

Church Movies Dinners School Activities

Study

HOLIDAY TRAVELLING

Where do you go on holiday?

How often do you go on holiday?

Do you spend the holidays with your children or family?

DAILY TRAVELING ONLY

Indicate with X

If self employed:

Any Cash Business conducted on premises: Yes No

Do you travel to different towns or cities: Yes No

How often do you travel? Daily: Yes No Weekly: Yes No

How many km do you travel? Daily: Weekly:

Drop off zones: Yes No

Bus/Taxi Travel: Yes No

Work Related Travel: Yes No

Deserted/Quite areas: Yes No

Extra information:



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CRIME RELATED INCEDENTS – IF ANY OF THE FOLLOWING IS APPLICABLE PROVIDE CASE NUMBER:

Indicate with X and submit CAS number with report of the incident:

House Breakings: Yes No

Intimidation: Yes No

Mysterious Phone Calls: Yes No

Hi-Jacking: Yes No

Smash & Grabs: Yes No

DANGEROUS SCENARIOS

Indicate with X

Flat Tyres: Yes No

Engine Failure: Yes No

Potholes: Yes No

School Kids Drop offs: Yes No

Other Activities:

ASSOCIATION DETAILS (Section 16)

Permission given to assist with the needed documentation from the association: Yes No



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Association Name:

Association Username:

Association Password:

HUNTING APPLICATION (Section 15)

Indicate with X where needed:

Are you member of hunting association: Yes No

Name of the hunting association:

Do you have occasional status? Yes No

Occasional number:

Do you have dedicated? Yes No

Dedicated number:

What type of hunting do you do (meat, trophy, harvest)?

Where do you usually hunt (RSA, Neighboring countries)?

How often do you hunt?

What do you hunt?

Why do you applying for this caliber?

What do you plan to hunt with this rifle?

How long have you been hunting?

SPORT SHOOTING APPLICATION

Indicate with X where needed:



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Name of the hunting association? Yes No

Do you have occasional status?

Occasional number :

Do you have dedicated status?

Dedicated number :

Where do you usually shoot?

How often do you sport shooting?

How long have you been doing sport shooting?

FARMERS

What Type Of Farming:

Km's to nearest Neighbor:

Radio/Cell Communication:

Km's of dirt road to main road:

Km's to boarder:

Laborers Living on Farm:

How number of permanent staff:

Casual Staff:

Any Cash Business conducted on farm:

Varmint Control Plan on Farm:

Environment surrounding house:

Gates and other obstacles from road to house:



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I am aware that it is an offence in terms of section 120 (9) (f) of the firearms control act, 2000 (Act 60 of 2000), to make a false statement in this application.

Name:

Date:

Signature: