



INFORMATION SHEET

Firearm Verification

BEFORE YOU START...

USE THIS FORM if you are an approved verifier to provide the Registrar of Firearms with verification of a firearm.

THE VERIFIER MUST COMPLETE SECTIONS A, B, AND D OF THE FORM AND SECTION C IF APPLICABLE.

IF YOU NEED HELP COMPLETING THIS APPLICATION FORM or require another form, call 1 800 731-4000. Additional information and some application forms are also available on our Web site at www.cfc-cafc.gc.ca.

Mail your completed application form and all attachment(s) to:

**Central Processing Site
P.O. Box 1200
Miramichi, N.B. E1N 5Z3**

PLEASE REMEMBER...

Whenever you handle firearms, follow all safety precautions.

The following information explains certain parts of the form and will help you answer some of the questions. You should read the instructions as you fill in your form. If you are still unsure about a question, call 1 800 731-4000 for assistance.

A - OWNER INFORMATION

Box 1

Provide the Firearms Licence Number and the name (last, first and middle) of the person who owns the firearm.

B - FIREARM INFORMATION

Boxes 3 to 6

Provide details for the firearm in the spaces provided.

Box i) Type

Using the legend provided on the application form, enter the code for the firearm type. For example, if you are verifying a rifle, print RI in the box.

Box j) Action

Using the legend provided on the application form, enter the code for firearm action. For example, if you are verifying a firearm with a bolt action, print BA in the box. Only print one code. If none of the codes are applicable, print OT (Other) and specify the action in the space provided.

C - DISTINGUISHING CHARACTERISTICS

Box 7

If the firearm bears any distinguishing characteristics describe them in the space provided.

D - VERIFIER INFORMATION

Box 8 a)

Provide your verifier number in Box 8 a).

Boxes 8 b) and c)

Provide your name (last and first) in Box 8 b) and c).

Boxes 8 d) and e)

Sign and date the form.



For Administrative Use

FIREARM VERIFICATION

ATTENTION:
Read the Information Sheet for explanations. Use an "X" to indicate your answers (where required). Print clearly in blue or black ink.

A OWNER INFORMATION

1. Firearms licence number	2. a) Last name	b) First name	c) Middle name
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B FIREARM INFORMATION

LEGEND - TYPE: CG = Combination gun CV = Commercial version HG = Handgun MG = Machine gun RI = Rifle SG = Shotgun SM = Submachine gun		LEGEND - ACTION: A = Air, spring or gas exceeding 152.4 m/sec (500 ft/sec) and 5.7 joules (4.2 foot pounds) BA = Bolt action CA = Converted automatic FA = Full automatic LA = Lever action MB = Multi-barrel PA = Pump action R = Revolver SA = Semi-automatic SS = Single shot OT = Other, please specify			
3. a) Registration certificate number (if applicable)		b) Firearm identification number (if applicable)		c) If firearm is a frame / receiver only and cannot discharge ammunition, check this box <input type="checkbox"/>	
d) Class <input type="checkbox"/> Non-restricted <input type="checkbox"/> Restricted <input type="checkbox"/> Prohibited			e) Serial number		f) Make
g) Manufacturer (if different from make)			h) Model		i) Type
j) Action		k) Gauge / Calibre	l) Shots	m) Barrel length <input type="checkbox"/> mm <input type="checkbox"/> in	n) FRT number
CALIBRE / SHOT / BARREL LENGTH COMBINATIONS					
4. First combination	a) Gauge / Calibre	b) Shots	c) Barrel length <input type="checkbox"/> mm <input type="checkbox"/> in	d) FRT number	
5. Second combination	a) Gauge / Calibre	b) Shots	c) Barrel length <input type="checkbox"/> mm <input type="checkbox"/> in	d) FRT number	
6. Third combination	a) Gauge / Calibre	b) Shots	c) Barrel length <input type="checkbox"/> mm <input type="checkbox"/> in	d) FRT number	
If more than 3 calibre / shot / barrel length combinations, check this box and attach list <input type="checkbox"/>					

C DISTINGUISHING CHARACTERISTICS

7.

D VERIFIER INFORMATION

8. a) Verifier's number	b) Last name	c) First name	
d) Verifier's signature			e) Date (Y / M / D)