

Date

Applicant

Legal person Natural person NB: A sole trader is not a legal person!

Personal identity number or Company registration

Name

--	--

Street name and number

Postcode

Town/city

--	--	--

Phone number

Mobile number

E-mail address

--	--	--

Types of firearms

State the types of firearms or essential components (and the maximum number of each) you wish to trade in

Number

State the types of firearms or essential components (and the maximum number of each) you wish to trade in	Number

See attachment

Premises

Store address (where the business is conducted)

Postal code

Town/city

--	--	--

Description of storage premises. If possible, attach floor plan or drawing.

--

See attachment

Additional information

E.g. certificates, knowledge, or other experience the applicant wishes to invoke regarding handling of firearms

--

See attachment

Applicant's signature / For a legal person; an authorised representative's signature

Date

Town/city

Signature

Printed name

The Swedish Police Authority's notes

Amount paid SEK

Date

Sign

--	--	--