Form 2

APPLICATION FOR PERMIT TO IMPORT AMMUNITION (RESIDENT)

(reg. 6(2))
REPUBLIC OF BOTSWANA
ARMS AND AMMUNITION ACT
(Cap. 24:01)

(To be submitted to the Licensing Officer in duplicate)

1.	SurnameID/Passport No
2.	Other Names
3.	Residential Address
4.	Arms for which ammunition is required:
	TypeCalibre
	Registration Certificate No /Arms Dealers Licence No
5.	Quantity of ammunition requiredrounds.
6.	Name and address of person/dealer from whom it is intended to import the ammunition:
7.	I hereby apply for a permit to import the ammunition specified in paragraphs 4 and 5 and
	I declare that the statements made are true and correct in all respects.
	Date
	Signature or Right Thumb Print
	Place
	NOTE: The applicant should forward this form when completed to the Licensing Officer
	for the District in which he resides, with the Registration Certificate and Arms Licence of
	the arms for which the ammunition is required.
	Notes by Licensing Officer:
	Approved/not approved (reasons where necessary)

Place	Signature
Fee paid P	O.R. No
Date Stamp:	Signature of Licensing Officer