

**Form-3 (Licensee - Sports Person)**

Part – I (Licensee Details)			
Name		Date of Birth (dd/mm/yyyy)	
Gender (M/F)		Occupation /Profession	
Parent/Spouse Name		Country	
Birth State		Birth District	
Phone Number (O)		Mobile No.	
Phone Number (R)		e-mail Address	
Exemption Certificate	MoS <input type="checkbox"/>	NRAI <input type="checkbox"/>	No. of events for which exemption sought

Present Address and Police Station:			
Address		State	
		District	
Police Station Name		PIN Code	

Permanent Address and Police Station:			
Address		State	
		District	
Police Station Name		PIN Code	

Part – II (Licence Details)			
Licence Number		Date of Issue (dd/mm/yyyy)	
Shooter Type	Normal <input type="checkbox"/>	Jumbo <input type="checkbox"/>	
Period of Validity	From (dd/mm/yyyy)	To (dd/mm/yyyy)	
Area Validity §		Date of Area Validity (dd/mm/yyyy)	

Part – III (Weapon Details)					
Total No. of Weapon Endorsed		Category			
General Category	None/One/Two/Three	Summary of Weapon		General	
				Exe Category	
Number of Exempted Weapon as per 667(E) 12-09-1985				<b>Total -</b>	
Details of Weapon - 1	Category (NPB / PB)	Type #	Bore of Weapon	Weapon No.	
	Make		Maximum Cartridges Allowed		
Area of Validity §		General Weapon <input type="checkbox"/>	Sports Weapon <input type="checkbox"/>		
Details of Weapon - 2	Category (NPB / PB)	Type #	Bore of Weapon	Weapon No.	
	Make		Maximum Cartridges Allowed		
Area of Validity §		General Weapon <input type="checkbox"/>	Sports Weapon <input type="checkbox"/>		
Details of Weapon - 3	Category (NPB / PB)	Type #	Bore of Weapon	Weapon No.	
	Make		Maximum Cartridges Allowed		
Area of Validity §		General Weapon <input type="checkbox"/>	Sports Weapon <input type="checkbox"/>		

Part – IV (Enclosures)					
Photo Attached	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Self attested photocopy of the license attached	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Date: .....

Place: ..... Signature of Licensee

# - Gun, Pistol, Revolver, Rifle, Carbine, Short Pistol

§ - District / State / All India / 3 State / Other

**ACKNOWLEDGEMENT**

Name			
License Number		Police Station Name	
Address			

Name & Signature of Receipt Clerk