

**APPLICATION FORM FOR RENEWAL OF ARM LICENCE**

Write in English and CAPITALS. Used Blue/Black Ball Pen One Character each.

Past a recent  
passport photo  
here

Signature or Thumb Impression of the  
Applicant in the BOX below

File No.

UIN No.

**IDENTITY OF APPLICATION**

NAME OF THE APPLICANT: \_\_\_\_\_

PARENT / SPOUSE: FATHER  MOTHER  HUSBAND  WIFE

PARENT / SPOUSE NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SINCE WHEN RESIDING (PRESENT ADDRESS): \_\_\_\_\_

MOBILE NO: \_\_\_\_\_ ADDHAR CARD NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

**LICENCE SPECIFIC DETAILS**

1. NEED FOR LICENCE: \_\_\_\_\_

2. WEAPON CATEGORY: \_\_\_\_\_ 3. WEAPON TYPE: \_\_\_\_\_

4. AREA VALIDITY: \_\_\_\_\_ 5. ARMS & AMMUNITION DETAILS: \_\_\_\_\_

6. DATE OF ISSUE: \_\_\_/\_\_\_/\_\_\_ 7. DATE OF ISSUED OF LICENCE: \_\_\_/\_\_\_/\_\_\_

8. DATE OF PURCHASE: \_\_\_/\_\_\_/\_\_\_

**DETAILS OF LICENCE EXTENTION**

IS YOUR LICENCE EXPIRE OR NOT: \_\_\_\_\_

LICENCE NO.: \_\_\_\_\_ DATE OF VALIDITY \_\_\_/\_\_\_/\_\_\_

RENEWAL OF ARM LICENCE: (TICK HERE) 1 Year  2 Year  3 Year

Place:

Date:

Signature/ Thumb Impression of Applicant