



# Government Gazette Staatskoerant

REPUBLIC OF SOUTH AFRICA  
REPUBLIEK VAN SUID-AFRIKA

Vol. 453

Pretoria, 27 March  
Maart 2003

No. 24599

**PART 2 OF 2**



**AIDS HELPLINE: 0800-0123-22 Prevention is the cure**

## APPLICATION FOR COMPENSATION

Section 137 of Firearms Control Act, 2000 (Act No 60 of 2000)

Page 1 of 7

SAPS Application for compensation

**D. PARTICULARS OF APPLICANT****1 NATURAL PERSON'S DETAILS****1.1 Type of identification (Indicate with X)**

1.2	SA Identity	Passport number	Non-SA citizen with permanent residence	
1.3	Identity number			
1.4	Passport number			
1.5	Surname			1.6 Initials
1.7	Full names			
1.8	Residential address			
				1.9 Code
1.10	Postal address			
				1.11 Code
1.12	Business telephone number	1.13 Home ( )	1.14 Work ( )	
1.15	Cell phone number	1.16 Fax ( )		
1.17	E-mail address			

**2 JURISTIC PERSON'S DETAILS**

2.1	Registered company name			
2.2	Trading as name			
2.3	FAR number			
2.4	Postal address			
				2.5 Code
2.6	Business address			
				2.7 Code
2.8	Business telephone number	2.9 Work ( )	2.10 Fax ( )	
2.11	E-mail address			

**3 RESPONSIBLE PERSON'S DETAILS**

3.1	Responsible person (full names and surname)			
3.2	Type of identification (Indicate with X)	SA identity	Passport number	
3.3	Identity number of responsible person			
3.4	Passport number of responsible person			
3.5	Cell phone number (if applicable)			
3.6	Physical address			
				3.7 Code
3.8	Postal address			
				3.9 Code

**4 REPRESENTATIVE'S DETAILS**

4.1	Name and surname			
4.2	Postal address			
				4.3 Code





### SAPS Application for compensation

4.7	Cell phone number	4.8	Fax	(     )
4.9	E-mail address			

5 PARTICULARS OF FIREARM LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION

5.1	Licence, permit, certificate or authorization type	
5.2	Licence, permit, certificate or authorization number	

6 **PARTICULARS OF FIREARM**

6.1	Type	
6.2	Calibre	
6.3	Make	
6.4	Model	

**Firearm component type:**

[illegible]

7 OTHER PARTICULARS

7.1	Police station name
7.2	SAPS 13 register reference number
7.3	Case reference number
7.4	Motivation for compensation

[illegible]9 **BANK PARTICULARS**

9.1	Account holder name	
9.2	Account type	
9.3	Account number	
9.4	Name of bank	
9.5	Branch name	
9.6	Bank branch code	

<b>E.</b>		<b>SIGNATURE OF APPLICANT</b> <small>(Sign only where applicable)</small>												
1	<input style="width: 100%;" type="text"/> Name of applicant in block letters	2	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Date</td> <td>C</td><td>C</td><td>Y</td><td>Y</td><td>-</td><td>M</td><td>M</td><td>-</td><td>D</td><td>D</td> </tr> </table>	Date	C	C	Y	Y	-	M	M	-	D	D
Date	C	C	Y	Y	-	M	M	-	D	D				
3	<hr style="border-top: 1px dashed black;"/> Signature of applicant	4	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Place</td> <td style="flex-grow: 1;"></td> </tr> </table>	Place										
Place														
5	<b>DETAILS OF POLICE OFFICIAL DEALING WITH APPLICATION</b>													
5.1	<input style="width: 100%;" type="text"/> Name of police official in block letters													
5.2	<input style="width: 100%;" type="text"/> Rank of police official in block letters	5.3												
		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td> </tr> </table> Persal number of police official										-		
								-						
5.4	<hr style="border-top: 1px dashed black;"/> Signature of police official													

**F. (This section must only be completed if the applicant cannot read or write)**

1. **R**  
**T**  
**P**

Right Thumb Print of applicant

2. Date: 

C	C	Y	Y	-	M	M	-	D	D
---	---	---	---	---	---	---	---	---	---

3. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Name of applicant in block letters

4. 

Place																			
-------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Name of police official in block letters

6. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Rank of police official in block letters

7. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Persal number of police official

8. Signature of police official

9. **DETAILS OF WITNESS**

9.1. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Name of witness in block letters

9.2. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Rank of witness in block letters

9.3. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Persal number of witness

9.4. Signature of witness

G. PARTICULARS OF INTERPRETER	
(This section must <u>only</u> be completed if the applicant cannot read or write, or understand this document)	
1 Name and surname of interpreter	
2 Identity number/Passport number of interpreter	
3 Residential address	
	4 Code
5 Postal address	
	5 Code

## SAPS Application for compensation

7	Telephone number	8	Home	( )	9	Work	( )
10	Cell phone number				11	Fax	( )
12	E-mail address						
13	Translated from (language)				To		

14	Date	C	C	Y	Y	-	M	M	-	D	D
15	Signature of interpreter										
16	Place										
17	Rank of police official in block letters										
18	Persal number of police official										

H. PARENTAL CONSENT IN CASE OF A MINOR												
1	Recommended						Not recommended					
2	Name and surname of parent/guardian											
3	Identity number/Passport number of parent/guardian											
4	Date	C	C	Y	Y	-	M	M	-	D	D	
5	Signature of parent/guardian											
6	Place											

I. IN CASE OF AUTHORIZED/REPRESENTATIVE PERSON												
1	Name and surname of nominee/authorized person											
2	Identity/Passport number of nominee/authorized person											
3	Date	C	C	Y	Y	-	M	M	-	D	D	
4	Signature of nominee/authorized person											
5	Place											

J. FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER												
RECOMMENDATION WITH REGARD TO THE APPLICATION												
1	Recommended						Not recommended					
2	Motivation											

3	Name of Designated Firearms Officer in block letters						4	Date	C	C	Y	Y	-	M	M	-	D	D
5	Rank of Designated Firearms Officer in block letters						6	Place										

7

.....  
Signature of Designated Firearms Officer

SAPS Application for compensation

8

--	--	--	--	--	--	--	--	--	--

Persal number of Designated Firearms Officer

Original



**SAPS Request to suspend a licence, permit, certificate or authorization**



SOUTH AFRICAN POLICE SERVICE

**REQUEST TO SUSPEND A FIREARM LICENCE, PERMIT,  
CERTIFICATE OR AUTHORIZATION**

Section 41, 55 and 69 of Firearms Control Act, 2000 (Act No 60 of 2000)

OFFICIAL DATE STAMP

DATE RECEIVED

A.

FOR OFFICIAL USE BY THE POLICE STATION  
WHERE THE APPLICATION IS CAPTURED

<sup>1</sup> Application reference no

B.

FOR OFFICIAL USE BY POLICE STATION WHERE REQUEST IS RECEIVED

Province

Area

Police station

Component code

General firearm transactions register ref no

C.

FOR OFFICIAL USE BY CENTRAL FIREARMS REGISTER

<sup>1</sup> Outstanding/Additional information required

<sup>2</sup> Persal number

C C Y Y - M M - D D

<sup>3</sup> Date

<sup>4</sup> Signature of police official

<sup>5</sup> Name in block letters

<sup>6</sup> Suspend firearm licence, permit, certificate or authorization (Indicate with X)

<sup>7</sup> Persal number

C C Y Y - M M - D D

<sup>8</sup> Date

<sup>9</sup> Signature of deciding officer

<sup>10</sup> Officer code

<sup>11</sup> Name in block letters

<sup>12</sup> Suspend firearm licence, permit, certificate or authorization (Indicate with X)

<sup>13</sup> Reason why suspension is unnecessary

<sup>14</sup> Persal number

C C Y Y - M M - D D

<sup>15</sup> Date

<sup>16</sup> Signature of deciding officer

<sup>17</sup> Officer code

<sup>18</sup> Name in block letters

## SAPS Request to suspend a licence, permit, certificate or authorization

**D. TYPE OF REQUEST OF SUSPENSION** (Indicate with X)

1	Suspension of a licence to possess a firearm	
2	Suspension of a dealer's licence	
3	Suspension of a manufacturer's licence	
4	Suspension of a gunsmith's licence	
5	Suspension of a temporary authorization to possess a firearm	
6	Suspension of a in-transit permit	
7	Suspension of a import permit	
8	Suspension of a export permit	
9	Suspension of a transport permit	
10	Suspension of an accreditation certificate	

**D. PARTICULARS OF WARRANT HOLDER****1 NATURAL PERSON'S DETAILS**

1.2	SA Identity	Passport number	
1.3	Identity number		
1.4	Passport number		
1.5	Surname	1.6 Initials	
1.7	Full names		
1.8	Residential address		
		1.9 Code	
1.10	Postal address		
		1.11 Code	
1.12	Business telephone number	1.13 Home ( )	1.14 Work ( )
1.15	Cell phone number		1.16 Fax ( )
1.17	E-mail address		

**2 JURISTIC PERSON'S DETAILS****2.1 OTHER BODIES**

2.2	Registered company name		
2.3	Trading as name		
2.4	FAR number		
2.5	Postal address		
		2.6 Code	
2.7	Business address		
		2.8 Code	
2.9	Business telephone number	2.10 Work ( )	2.11 Fax ( )
2.12	E-mail address		

**3 RESPONSIBLE PERSON'S DETAILS**

3.1	Responsible person (names and surname)		
3.2	Type of identification (Indicate with X)	SA Identity	Passport number
3.3	Identity number of responsible person		
3.3	Passport number of responsible person		

**SAPS Request to suspend a licence, permit, certificate or authorization**

[illegible]

**E. PARTICULARS OF FIREARM LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**

[illegible]

2	Reason why suspension of licence, permit, certificate or authorization is requested

3	Date on which suspension is requested	Date	C	C	Y	Y	-	M	M	-	D	D
---	---------------------------------------	------	---	---	---	---	---	---	---	---	---	---

SAPS Request to suspend a licence, permit, certificate or authorization

## F. FOR OFFICIAL USE BY THE DESIGNATED FIREARMS OFFICER

1

## RECOMMENDATION WITH REGARD TO THE APPLICATION

Recommended

Not recommended

2

Motivation regarding the request to suspend

3

Name of Designated Firearms Officer in block letters

5

Rank of Designated Firearms Officer in block letters

7

Signature of Designated Firearms Officer

4

Date C C Y - M M - D D

6

Place

8

Personal number of Designated Firearms Officer



SAPS Transfer of firearm ownership



SOUTH AFRICAN POLICE SERVICE

**TRANSFER OF FIREARM OWNERSHIP**

Section 125(2)(a)(iii) of Firearms Control Act, 2000 (Act No 60 of 2000)

OFFICIAL DATE STAMP

DATE RECEIVED

A. FOR OFFICIAL USE BY POLICE STATION WHERE APPLICATION WAS RECEIVED												
Province												
Area												
Police station												
Component code												
SAPS 13 register reference number	R	E	F	N	O	C	C	Y	Y			
General firearm transactions register ref no												

**B. PARTICULARS OF CURRENT POSSESSOR****1. NATURAL PERSON'S DETAILS**

1.1	SA identity	Passport											
1.2	Identity number												
1.3	Passport number												
1.4	Surname										1.5 Initials		
1.6	Residential address												
											1.7 Code		
1.8	Postal address												
											1.9 Code		
1.10	Telephone number	1.11 Home	( )	1.12 Work	( )								
1.13	Cell phone number				1.14 Fax	( )							
1.15	E-mail address												

**2. JURISTIC PERSON'S DETAILS****2.1. OTHER BODIES**

2.2	Registered company name											
2.3	Trading as name											

## SAPS Transfer of firearm ownership

2.4	FAR number											
2.5	Postal address											
										2.6 Code		
2.7	Business address											
										2.8 Code		
2.9	Business telephone number	2.10 Work	( )				2.11 Fax	( )				
2.12	E-mail address											

## 3 RESPONSIBLE PERSON'S DETAILS

3.1	Responsible person (full names and surname)											
3.2	Type of identification (Indicate with X)	SA identity				Passport number						
3.3	Identity number of responsible person											
3.4	Passport number of responsible person											
3.5	Cell phone no (if applicable)											
3.6	Physical address											
										3.7 Code		
3.8	Postal address											
										3.9 Code		
4	Reason for transfer of firearm											

## C. PARTICULARS OF FIREARM(S) THAT IS TO BE TRANSFERRED

		(1)	(2)	(3)	(4)
1.1	Type				
1.2	Calibre				
1.3	Make				
1.4	Model				
Firearm component type:					
1.5	Barrel serial number				
1.7	Frame serial number				
1.9	Receiver serial number				
		1.6 Make			
		1.8 Make			
		1.10 Make			

## D. PARTICULARS OF DEALER/GUNSMITH TO WHOM THE FIREARM IS TRANSFERRED

2.2	Registered company name											
2.3	Trading as name											
2.4	FAR number											
2.5	Postal address											
										2.6 Code		

## SAPS Transfer of firearm ownership

2.7	Business address			
			2.8 Code	
2.9	Business telephone number	2.10 Work ( )	2.11 Fax ( )	
2.12	E-mail address			

## D. SIGNATURE OF CURRENT OWNER (Sign only where applicable)

1	Name of current owner in block letters		2	Date	C	C	Y	Y	-	M	M	-	D	D
3	Signature of current owner		4	Place										

## 5. DETAILS OF POLICE OFFICIAL DEALING WITH APPLICATION

5.1	Name of police official in block letters		5.3	Personal number of police official										
5.2	Rank of police official in block letters													
5.4	Signature of police official													

## 6. SIGNATURE OF DEALER/GUNSMITH

6.1	Name of dealer/gunsmith in block letters		6.2	Date	C	C	Y	Y	-	M	M	-	D	D
6.3	Signature of dealer/gunsmith		6.4	Place										

## E. (This section must only be completed if the applicant cannot read or write)

1	R T P	Right Thumb Print of applicant	2	Date	C	C	Y	Y	-	M	M	-	D	D
5	Name of police official in block letters		3	Name of applicant in block letters										
6	Rank of police official in block letters		4	Place										
8	Signature of police official		7	Personal number of police official										
9	DETAILS OF WITNESS													
9.1	Name of witness in block letters													

## SAPS Transfer of firearm ownership

9.2   
Rank of witness in block letters

9.3   
Persal number of witness

9.4   
Signature of witness

**H. PARTICULARS OF INTERPRETER**  
(This section must only be completed if the applicant cannot read or write, or understand this document)

1	Name and surname of interpreter											
2	Identity number/Passport number of interpreter											
3	Residential address											
			4 Code									
5	Postal address											
			6 Code									
7	Telephone number	8 Home	( )		9 Work	( )						
10	Cell phone number					11 Fax	( )					
12	E-mail address											
13	Translated from (language)				To							

14	Date	C	C	Y	Y	-	M	M	-	D	D
16	Place										

15   
Signature of Interpreter

17   
Rank of police official in block letters

18   
Persal number of police official

**J. IN CASE OF NOMINEE/AUTHORISED PERSON**

1	Name and surname of nominee/authorized person											
2	Identity/Passport number of nominee/authorized person											
3	Date	C	C	Y	Y	-	M	M	-	D	D	
5	Place											

4   
Signature of nominee/authorized person

**J. PARTICULARS OF POLICE OFFICIAL**

1   
Name of police official in block letters

2   
Date C C Y Y - M M - D D

3   
Rank of police official in block letters

4   
Place

5   
Signature of police official

6   
Persal number of police official



### SAPS Notification of incorrect information



SOUTH AFRICAN POLICE SERVICE

## NOTIFICATION OF INCORRECT INFORMATION

<b>OFFICIAL DATE STAMP</b>        <b>DATE RECEIVED</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="12" style="text-align: center;">A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE NOTIFICATION IS CAPTURED</th> </tr> <tr> <td style="width: 30%;">1 Notification reference no</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>    <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="12" style="text-align: center;">B. FOR OFFICIAL USE BY POLICE STATION WHERE NOTIFICATION IS RECEIVED</th> </tr> <tr> <td style="width: 30%;">Province</td> <td colspan="11"></td> </tr> <tr> <td>Area</td> <td colspan="11"></td> </tr> <tr> <td>Police station</td> <td colspan="11"></td> </tr> <tr> <td>Component code</td> <td colspan="11"></td> </tr> <tr> <td>General firearm transaction register number</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>    <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="12" style="text-align: center;">C. PARTICULARS OF APPLICANT</th> </tr> <tr> <td colspan="12" style="padding: 5px;"><b>NATURAL PERSON'S DETAILS</b></td> </tr> <tr> <td colspan="12" style="padding: 5px;">Type of identification (Indicate with X)</td> </tr> <tr> <td style="width: 15%;">SA Identity</td> <td style="width: 15%;">Passport number</td> <td colspan="10" style="width: 70%;">Non-SA citizen with permanent residence</td> </tr> <tr> <td>Identity number</td> <td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>Passport number</td> <td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>Surname</td> <td colspan="9"></td> <td style="width: 10%;">1.6 Initials</td> <td></td> </tr> <tr> <td>Full names</td> <td colspan="11"></td> </tr> <tr> <td>Residential address</td> <td colspan="11"></td> </tr> <tr> <td colspan="10"></td> <td style="width: 10%;">1.9 Code</td> <td></td> </tr> <tr> <td>Postal address</td> <td colspan="11"></td> </tr> <tr> <td colspan="10"></td> <td style="width: 10%;">1.11 Code</td> <td></td> </tr> <tr> <td>Business telephone number</td> <td style="width: 10%;">1.13 Home</td> <td>( )</td> <td style="width: 10%;">1.14 Work</td> <td>( )</td> <td colspan="7"></td> </tr> <tr> <td>Cell phone number</td> <td></td> <td></td> <td style="width: 10%;">1.16 Fax</td> <td>( )</td> <td colspan="7"></td> </tr> <tr> <td>E-mail address</td> <td colspan="11"></td> </tr> </table>    <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="12" style="padding: 5px;"><b>JURISTIC PERSON'S DETAILS</b></td> </tr> <tr> <td colspan="12" style="padding: 5px;"><b>OTHER BODIES</b></td> </tr> <tr> <td colspan="12" style="padding: 5px;">Registered company name</td> </tr> </table>	A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE NOTIFICATION IS CAPTURED												1 Notification reference no												B. FOR OFFICIAL USE BY POLICE STATION WHERE NOTIFICATION IS RECEIVED												Province												Area												Police station												Component code												General firearm transaction register number												C. PARTICULARS OF APPLICANT												<b>NATURAL PERSON'S DETAILS</b>												Type of identification (Indicate with X)												SA Identity	Passport number	Non-SA citizen with permanent residence										Identity number												Passport number												Surname										1.6 Initials		Full names												Residential address																						1.9 Code		Postal address																						1.11 Code		Business telephone number	1.13 Home	( )	1.14 Work	( )								Cell phone number			1.16 Fax	( )								E-mail address												<b>JURISTIC PERSON'S DETAILS</b>												<b>OTHER BODIES</b>												Registered company name											
A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE NOTIFICATION IS CAPTURED																																																																																																																																																																																																																																																																																																																									
1 Notification reference no																																																																																																																																																																																																																																																																																																																									
B. FOR OFFICIAL USE BY POLICE STATION WHERE NOTIFICATION IS RECEIVED																																																																																																																																																																																																																																																																																																																									
Province																																																																																																																																																																																																																																																																																																																									
Area																																																																																																																																																																																																																																																																																																																									
Police station																																																																																																																																																																																																																																																																																																																									
Component code																																																																																																																																																																																																																																																																																																																									
General firearm transaction register number																																																																																																																																																																																																																																																																																																																									
C. PARTICULARS OF APPLICANT																																																																																																																																																																																																																																																																																																																									
<b>NATURAL PERSON'S DETAILS</b>																																																																																																																																																																																																																																																																																																																									
Type of identification (Indicate with X)																																																																																																																																																																																																																																																																																																																									
SA Identity	Passport number	Non-SA citizen with permanent residence																																																																																																																																																																																																																																																																																																																							
Identity number																																																																																																																																																																																																																																																																																																																									
Passport number																																																																																																																																																																																																																																																																																																																									
Surname										1.6 Initials																																																																																																																																																																																																																																																																																																															
Full names																																																																																																																																																																																																																																																																																																																									
Residential address																																																																																																																																																																																																																																																																																																																									
										1.9 Code																																																																																																																																																																																																																																																																																																															
Postal address																																																																																																																																																																																																																																																																																																																									
										1.11 Code																																																																																																																																																																																																																																																																																																															
Business telephone number	1.13 Home	( )	1.14 Work	( )																																																																																																																																																																																																																																																																																																																					
Cell phone number			1.16 Fax	( )																																																																																																																																																																																																																																																																																																																					
E-mail address																																																																																																																																																																																																																																																																																																																									
<b>JURISTIC PERSON'S DETAILS</b>																																																																																																																																																																																																																																																																																																																									
<b>OTHER BODIES</b>																																																																																																																																																																																																																																																																																																																									
Registered company name																																																																																																																																																																																																																																																																																																																									

2.3	Trading as name										
2.4	FAR number										
2.5	Postal address										
2.6	Code										
2.7	Business address										
2.8	Code										
2.9	Business telephone number	2.10 Work	( )					2.11 Fax	( )		
2.12	E-mail address										

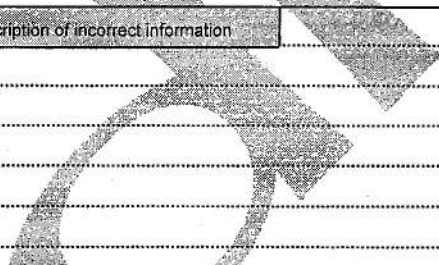
### 3 RESPONSIBLE PERSON'S DETAILS

3.1	Responsible person (full names and surname)																	
3.2	Type of identification (Indicate with X)					SA identity					Passport number							
3.3	Identity number of responsible person																	
3.4	Passport number of responsible person																	
3.5	Cell phone number																	
3.6	Physical address																	
														3.7 Code				
3.8	Postal address																	
														3.9 Code				

D. PARTICULARS OF INCORRECT LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION

1	Licence, permit, certificate or authorization type	2	Licence, permit, certificate or authorization number	3	Date issued

## 4 OTHER INFORMATION

4.1	Description of incorrect information
	

5		6	
Incorrect firearm particulars		Correct firearm particulars	
5.1	Type	6.1	Type
5.2	Calibre	6.2	Calibre
5.3	Make	6.3	Make
5.4	Model	6.4	Model
Firearm component type:		Firearm component type:	
5.5	Barrel serial number	6.5	Barrel serial number
5.6	Frame serial number	6.6	Frame serial number
5.7	Receiver serial number	6.7	Receiver serial number

### SAPS Notification of incorrect information


E. **SIGNATURE OF APPLICANT** (Sign only where applicable)

1	<input type="text"/>	2	Date	C	C	Y	Y	-	M	M	-	D	D
	Name of applicant in block letters												
3	<input type="text"/>	4	Place										
	Signature of applicant												

**DETAILS OF POLICE OFFICIAL DEALING WITH APPLICATION**

5.1	<input type="text"/>	
	Name of police official in block letters	
5.2	<input type="text"/>	
	Rank of police official in block letters	
5.3		<input type="text"/>
		Personal number of police official
5.4	<input type="text"/>	
	Signature of police official	

F. (This section must only be completed if the applicant cannot read or write)

1	R T P		2	Date	C	C	Y	Y	-	M	M	-	D	D															
3	Name of applicant in block letters																												
4	Place																												
5	Name of police official in block letters																												
6	Rank of police official in block letters																												
7	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Persal number of police official																												
8	Signature of police official																												

### DETAILS OF WITNESS

9.1	<div></div>	Name of witness in block letters
9.2	<div></div>	Rank of witness in block letters
9.3	<div></div>	Personal number of witness
9.4	<div></div>	

G. PARTICULARS OF INTERPRETER

(This section must only be completed if the applicant cannot read or write, or understand this document)

[illegible]

## SAPS Notification of incorrect information

5	Postal address			
			6 Code	
7	Telephone number	8 Home ( )	9 Work ( )	
10	Cell phone number			11 Fax ( )
12	E-mail address			
13	Translated from (language)		To	

14	Date	C	C	Y	Y	-	M	M	-	D	D
----	------	---	---	---	---	---	---	---	---	---	---

15  
Signature of interpreter

16	Place										
----	-------	--	--	--	--	--	--	--	--	--	--

17  
Rank of police official in block letters

18											-	
----	--	--	--	--	--	--	--	--	--	--	---	--

Personal number of police official

H. IN CASE OF NOMINEE/AUTHORIZED PERSON

1	Name and surname of nominee/authorized person																			
2	Identity/Passport number of nominee/authorized person																			

3	Date	C	C	Y	Y	-	M	M	-	D	D
---	------	---	---	---	---	---	---	---	---	---	---

4  
Signature of nominee/authorized person

5	Place										
---	-------	--	--	--	--	--	--	--	--	--	--

I. PARTICULARS OF DESIGNATED FIREARMS OFFICER

1  
Name of Designated Firearms Officer in block letters

2	Date	C	C	Y	Y	-	M	M	-	D	D
---	------	---	---	---	---	---	---	---	---	---	---

3  
Rank of Designated Firearms Officer in block letters

4	Place										
---	-------	--	--	--	--	--	--	--	--	--	--

5  
Signature of Designated Firearms Officer

6											-	
---	--	--	--	--	--	--	--	--	--	--	---	--

Personal number of Designated Firearms Officer



## APPLICATION TO DECLARE PREMISES A FIREARM FREE ZONE

[Section 140 of the Firearms Control Act, 2000 (Act No 60 of 2000)]

<b>OFFICIAL DATE STAMP</b>	<b>A. FOR OFFICIAL USE BY THE POLICE STATION WHERE THE APPLICATION IS RECEIVED</b>  1 Province _____ 2 Area _____ 3 Police station _____ 4 Component code _____ 5 SAPS 86 ref no _____
<b>DATE RECEIVED</b>	

B. FOR OFFICIAL USE BY CENTRAL FIREARMS REGISTER																
1 Declared a Firearm Free Zone																
2 SAPS Head Office reference no																
3 Date received							C	C	Y	Y	-	M	M	-	D	D
4 Date declared as a Firearm Free Zone							C	C	Y	Y	-	M	M	-	D	D
5 Government Gazette reference no																
6 Outstanding/Additional information required																

C. APPLICATION TO DECLARE PREMISES FIREARM FREE ZONE [Section 140 of the Firearms Control Act, 2000 (Act No 60 of 2000)]	
Name of institution	
Name of person applying on behalf of the institution	
SA Identity	Passport (Indicate with X)
Identity number	
Passport number	
Capacity of person applying	
Names and surnames of persons on the safety team	



8	Physical address of institution		8.1 Code					
9	Postal address of institution		8.2 Code					
10	Temporary safe keeping facilities for firearms available (Indicate with X)		YES			NO		
11	If yes, submit a description of the safekeeping facilities							
12	Motivation of application							
13	Contact particulars of person applying							
14	Emergency tel no.	( )	15 Fax	( )				
16	Cell phone number							
17	E-mail address							

**Conditions**

1. The premises declared a Firearm Free Zone must be clearly identified and demarcated.
2. Signs must be erected/posted at all the main entrances to the premises in English and where applicable in the predominant local language and maintained.
3. A map of the premises which already specify the demarcated area and sign must be attached to the application.
4. The institution where premises are declared Firearm Free Zone must endeavour to mark all correspondence accordingly to reflect the premises firearm free status.
5. The person applying on behalf of the Institution must notify the Designated Firearms Officer responsible for the area of any changes that may occur to any information submitted in this application.

1	Name of applicant in block letters		2 Date	C	C	Y	Y	-	M	M	-	D	D
3	Signature of applicant		4 Place										

1	<b>D. INSPECTION AND RECOMMENDATION OF DESIGNATED FIREARMS OFFICER</b>	

2	Name of Designated Firearms Officer in block letters		3 Date	C	C	Y	Y	-	M	M	-	D	D
4	Rank of Designated Firearms Officer		5 Place										
6	Signature of Designated Firearms Officer		7										
		Personal number of Designated Firearms Officer											

1 **E. RECOMMENDATION OF STATION COMMISSIONER**

.....

.....

.....

.....

.....

2

Name of Station Commissioner in block letters

3 Date  C  C  Y  Y -  M  M -  D  D

4

Rank of Station Commissioner

5 Place

6

Signature of Station Commissioner

7         -

Personal number of Station Commissioner

1 **F. RECOMMENDATION BY PROVINCIAL COMMISSIONER**

.....

.....

.....

.....

.....

2

Name of Provincial Commissioner in block letters

3 Date  C  C  Y  Y -  M  M -  D  D

4

Signature of Provincial Commissioner

5 Place

1 **G. RECOMMENDATION BY NATIONAL COMMISSIONER**

.....

.....

.....

.....

.....

2

Name of National Commissioner in block letters

3 Date  C  C  Y  Y -  M  M -  D  D

4

Signature of National Commissioner

5 Place

1

H. RECOMMENDATION BY SECRETARIAT OF SAFETY AND SECURITY	

2

--

Name of Secretary of Safety and Security in block letters

3

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

4

Signature of Secretary of Safety and Security

5

Place	
-------	--

1

I. APPROVAL/REFUSAL BY THE MINISTER OF SAFETY AND SECURITY	

2

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

3

Signature of Minister of Safety and Security

4

Place	
-------	--

This document should be in triplicate as one should go to the applicant, one should stay with the station for record purposes and one should be forwarded to Head Office for further processing of the Firearm Free Zone declaration.

SAPS Acknowledgement of receipt for firearm applications



SOUTH AFRICAN POLICE SERVICE

## ACKNOWLEDGEMENT OF RECEIPT FOR FIREARM APPLICATIONS

## A. PARTICULARS OF POLICE STATION

1	Police station where application/notification/authorization was received										
2	Telephone number	( )	3	Fax	( )						
4	Reference No										

B. TYPE OF LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION  
(Indicate with X)

1	Competency certificate	4.3	Import permit
1.1	To trade in firearms	4.4	Export permit
1.2	To manufacture firearms	4.5	Transporter's permit
1.3	To conduct business as a gunsmith	4.6	In-transit permit
1.4	To possess a firearm (Indicate with X)	4.7	Multiple import and export permit
	Handgun <input type="checkbox"/> Rifle <input type="checkbox"/> Shotgun <input type="checkbox"/>	5	Authorizations
2	Licences	5.1	Temporary authorization to possess a firearm
2.1	Licence to possess firearm for self-defence	5.2	Temporary authorization to trade in firearms and ammunition
2.2	Licence to possess restricted firearm for self-defence	5.3	Temporary authorization to a manufacturer to display firearms and ammunition
2.3	Licence to possess firearm for security officer purposes	5.4	Temporary authorization to conduct business as a gunsmith
2.4	Licence to possess firearm for occasional hunting and sport-shooting	6	Accreditations
2.5	Licence to possess firearm for dedicated hunting and dedicated sports shooting	6.1	For a shooting range where public collectors may discharge firearms
2.6	Licence to possess firearm in private collection	6.2	For a shooting range where unrestricted amount of ammunition may be bought and fired
2.7	Licence to possess a firearm, in public collection (museums)	6.3	To provide training
2.8	Licence to possess firearm for business purposes business in hunting	6.4	To conduct business in hunting
2.9	Licence to possess firearm for business purposes other business purposes	6.5	To provide security services for its own business
2.10	To provide security services for its own business	6.6	As a sports shooting and hunting association
3	Licence issued to particular categories of persons	6.7	As a collector association
3.1	Licence to deal in firearms and ammunition	6.8	As a museum
3.2	Licence to manufacture firearms and ammunition	6.9	As a public collector of firearms and ammunition
3.3	Licence to conduct business as a gunsmith	6.10	As a game hunter
4	Permits	6.11	As an official institution
4.1	Permit to possess ammunition in a private collection	6.12	For such business purposes as the Registrar may determine
4.2	Permit to possess ammunition in a public collection		

continue



7	Application for re-licensing of firearm(s)	18	Notification on assignment of a new responsible person for juristic person
8	Application for the renewal of a firearm licence, permit, certificate or authorization	19	Notification of Incorrect information
9	Application for a permit to collect ammunition	20	Notification of lost/stolen/round firearms
10	Application for compensation	21	Notification of ceasing to carry on business
11	Application for a further competency certificate	22	Notification requirement to deactivate a firearm
12	Application for duplicate licence, permit, certificate or authorization for lost, stolen and defaced licence	23	Notice of appeal
13	Application to manufacture a new firearm of ammunition type	24	Request to suspend a firearm licence, permit, certificate or authorization
14	Notification of change of commercial agent premises	25	Request to alter a firearm by a gunsmith
15	Notification of lost or stolen licence, permit, certificate or authorization	26	Transfer of firearm ownership
16	Notification of change of address	27	Cancellation of a firearm licence, permit, certificate or authorization application
17	Notification of change of circumstances	28	Surrendering of firearm item(s) form

### NATURAL PERSON'S DETAILS

[illegible]

2.1	Registered company name	
2.2	Trading as name	
2.3	FAR number	

2.1	Responsible person (full names and surname)									
2.2	Type of identification (Indicate with X)				SA identity		Passport number			
2.3	Identity number of responsible person									
2.4	Passport number of responsible person									

3.1	Name and surname
-----	------------------

1.1	Institution name	
1.2	Institution FAR number	



### SAPS Acknowledgement of receipt

1.3	Postal address										
1.5	Business address										
1.7	Contact telephone number	1.8 Work	(      )					1.9 Fax	(      )		
1.10	E-mail address										

### 2.3 GUNSMITH'S DETAILS

[illegible]

## D. TYPE OF NOTICE OF APPEAL (Indicate with X)

6.3	Refusal of a licence, permit, certificate or authorization
6.3	An administrative decision
6.3	Declaration of unfitness
6.3	Cancellation of a licence, permit, certificate or authorization

6.3	Reference number	
6.3	Licence, permit, certificate or authorization application no.	

**E. PARTICULARS OF LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION**  
(Fill in where applicable)

## LICENCE, PERMIT, CERTIFICATE OR AUTHORIZATION DETAILS

	(1)	(2)	(3)	(4)
2	Licence, permit, certificate or authorization number			
3	Date issued			
4	Expiry date			

### FIREARM DETAILS

		(1)	(2)	(3)	(4)
1.1	Type				
1.2	Calibre				
1.3	Make				
1.4	Model				

Firearm component type:

[illegible]

3 Period for which authorization is required FROM 

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

TO 

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

SAPS Acknowledgement of receipt

## F. PARTICULARS OF DESIGNATED FIREARMS OFFICER

1	<input type="text"/>	2	<input type="text"/>	<div>OFFICIAL DATE STAMP</div>
	Name of Designated Firearms Officer in block letters		Rank of Designated Firearms Officer in block letters	
3	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	4	<input type="text"/>	
	Personal number of Designated Firearms Officer		Signature of Designated Firearms Officer	

draft



## A. ACKNOWLEDGEMENT OF RECEIPT

[illegible]

B.	RECIPIENT
----	-----------

**Name of police official in block letters**

Rank of police official

Persal number of police official

Signature of police official

OFFICIAL DATE STAMP



1 Dealer FAR no				

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

<sup>1</sup> Trading as name of dealer

<sup>2</sup> Licence number of dealer

C. TO WHOM SUPPLIED

[illegible]

<sup>5</sup> I certify that the foregoing particulars are true and correct

5

Dealer's signature \_\_\_\_\_

**Name of dealer in block letters**

8

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---



A. ACKNOWLEDGEMENT OF RECEIPT

[illegible]

B.	RECIPIENT
<p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p> <p>8. _____</p> <p>9. _____</p> <p>10. _____</p> <p>11. _____</p> <p>12. _____</p> <p>13. _____</p> <p>14. _____</p> <p>15. _____</p> <p>16. _____</p> <p>17. _____</p> <p>18. _____</p> <p>19. _____</p> <p>20. _____</p> <p>21. _____</p> <p>22. _____</p> <p>23. _____</p> <p>24. _____</p> <p>25. _____</p> <p>26. _____</p> <p>27. _____</p> <p>28. _____</p> <p>29. _____</p> <p>30. _____</p> <p>31. _____</p> <p>32. _____</p> <p>33. _____</p> <p>34. _____</p> <p>35. _____</p> <p>36. _____</p> <p>37. _____</p> <p>38. _____</p> <p>39. _____</p> <p>40. _____</p> <p>41. _____</p> <p>42. _____</p> <p>43. _____</p> <p>44. _____</p> <p>45. _____</p> <p>46. _____</p> <p>47. _____</p> <p>48. _____</p> <p>49. _____</p> <p>50. _____</p> <p>51. _____</p> <p>52. _____</p> <p>53. _____</p> <p>54. _____</p> <p>55. _____</p> <p>56. _____</p> <p>57. _____</p> <p>58. _____</p> <p>59. _____</p> <p>60. _____</p> <p>61. _____</p> <p>62. _____</p> <p>63. _____</p> <p>64. _____</p> <p>65. _____</p> <p>66. _____</p> <p>67. _____</p> <p>68. _____</p> <p>69. _____</p> <p>70. _____</p> <p>71. _____</p> <p>72. _____</p> <p>73. _____</p> <p>74. _____</p> <p>75. _____</p> <p>76. _____</p> <p>77. _____</p> <p>78. _____</p> <p>79. _____</p> <p>80. _____</p> <p>81. _____</p> <p>82. _____</p> <p>83. _____</p> <p>84. _____</p> <p>85. _____</p> <p>86. _____</p> <p>87. _____</p> <p>88. _____</p> <p>89. _____</p> <p>90. _____</p> <p>91. _____</p> <p>92. _____</p> <p>93. _____</p> <p>94. _____</p> <p>95. _____</p> <p>96. _____</p> <p>97. _____</p> <p>98. _____</p> <p>99. _____</p> <p>100. _____</p>	

1

Name of police official in block letters

2

Rank of police official

OFFICIAL DATE STAMP

3 

--	--	--	--	--	--	--	--	--	--

Persal number of police official

4. \_\_\_\_\_  
Signature of police official



[illegible]

B.	RECIPIENT
----	-----------

OFFICIAL DATE STAMP

OFFICIAL DATE STAMP



1 Manufacturer's FAR no			

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

Date	C	C	X	Y	-	M	M	-	D	C
------	---	---	---	---	---	---	---	---	---	---


<sup>1</sup>Trading as name of manufacturer<sup>2</sup> Licence number of manufacturer

C. FROM WHOM SUPPLIED

[illegible]

<sup>5</sup> I certify that the foregoing particulars are true and correct

6  
-----  
Manufacturer's signature

7  8

Name of manufacturer in block letters

8 Date C C Y Y - M M - D D

A. ACKNOWLEDGEMENT OF RECEIPT

Remarks

B.	RECIPIENT
1.	2.
3.	4.
5.	6.
7.	8.
9.	10.
11.	12.
13.	14.
15.	16.
17.	18.
19.	20.
21.	22.
23.	24.
25.	26.
27.	28.
29.	30.
31.	32.
33.	34.
35.	36.
37.	38.
39.	40.
41.	42.
43.	44.
45.	46.
47.	48.
49.	50.
51.	52.
53.	54.
55.	56.
57.	58.
59.	60.
61.	62.
63.	64.
65.	66.
67.	68.
69.	70.
71.	72.
73.	74.
75.	76.
77.	78.
79.	80.
81.	82.
83.	84.
85.	86.
87.	88.
89.	90.
91.	92.
93.	94.
95.	96.
97.	98.
99.	100.

1

Name of police official in block letters

2

Rank of police official

OFFICIAL DATE STAMP

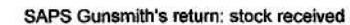
3 

--	--	--	--	--	--	--	--	--

Persal number of police official

4 \_\_\_\_\_  
Signature of police official





**GUNSMITH'S RETURN : STOCK RECEIVED**

Section 67(7) of Firearms Control Act, 2000 (Act No 60 of 2000)

[illegible]<sup>2</sup> Period form

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

To

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

## A. GUNSMITH'S PARTICULARS

<sup>1</sup> Trading as name of gunsmith

<sup>2</sup> Licence number of gunsmith

### B. PARTICULARS OF FIREARMS RECEIVED

**C. FROM WHOM RECEIVED**

[illegible]

<sup>5</sup> I certify that the foregoing particulars are true and correct

6

**Gunsmith's Signature**

7

**Name of gunsmith in block letters**

8

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

SAPS Gunsmith's return: stock received

**A. ACKNOWLEDGEMENT OF RECEIPT**

1 Remarks

**B. RECIPIENT**1   
Name of police official in block letters2   
Rank of police official

OFFICIAL DATE STAMP

3   
Persal number of police official4   
Signature of police official



1 Gunsmith FAR no			

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

Date	C	C	Y	Y	-	M	M	-	D	D
------	---	---	---	---	---	---	---	---	---	---

1	Trading as name of gunsmith
2	Licence number of gunsmith

C. FROM WHOM SUPPLIED

[illegible]

**6** \_\_\_\_\_  
Gunsmith's signature

7

Name of gunsmith in block letters

8	Date	C	C	Y	Y	-	M	M	-	D	D
---	------	---	---	---	---	---	---	---	---	---	---

## Remarks

[illegible]

\_\_\_\_\_

2

--	--	--	--	--	--	--	--	--

4

OFFICIAL DATE STAMP

**SCHEDULE "B"**  
**LIST OF FEES PAYABLE**

Persons responsible for payment	Circumstances for which fee is payable	Method of payment	Amount
Applicant	Application for a copy of a firearm licence (Section 29)	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R 60.00
	Renewal of licence: <ul style="list-style-type: none"> <li>• Licence to possess firearm for self defence (5 years) (Section 13)</li> <li>• Licence to possess restricted firearm for self-defence (2 years) (Section 14)</li> <li>• Licence to possess firearm for occasional hunting and sports-shooting (10 years) (Section 15)</li> <li>• Licence to possess firearm, and permit to possess ammunition in a public collection (10 years) (Section 19)</li> <li>• Licence to possess firearm for business purposes: business in hunting (10 years) (Section 20)</li> <li>• Licence to possess a firearm for business purposes: Business other than hunting (2 years) (Section 20)</li> </ul>		
	Competency Certificate (paper certificate): (Section 6/9) <ul style="list-style-type: none"> <li>• To possess a firearm for private use</li> </ul>		
	Competency Certificate (card):(Section 6/9) <ul style="list-style-type: none"> <li>• To possess a firearm for business purposes</li> <li>• To trade in firearms</li> <li>• To manufacture firearms</li> <li>• To conduct business as a gunsmith</li> </ul>		
	Renewal of ammunition collector's permit (Transitional Provisions): <ul style="list-style-type: none"> <li>• Permit is valid for one year</li> </ul>		
	Re-licensing: Licence Cards (Transitional provisions) - renewal of a licence, permit or authorization <ul style="list-style-type: none"> <li>• For private use</li> <li>• For dedicated sports-shooting</li> <li>• For dedicated hunting</li> <li>• For business purposes</li> <li>• To possess firearms in a private collection</li> <li>• To possess firearms in a public collection</li> </ul>		



	Duplicate (replacement) of licence cards, permits, certificates and authorizations (Section 29)		
Applicant	<p>Application for a new firearm licence (section 13)</p> <p>Ammunition collector's permit (paper permit):</p> <ul style="list-style-type: none"> <li>To possess ammunition in a private collection (Section 18)</li> <li>To possess ammunition in a public collection (Section 19)</li> </ul>	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R 120.00
Applicant	<p>Accreditation certificate (paper certificate):</p> <ul style="list-style-type: none"> <li>As an association (Section 16)</li> <li>For business purpose (Section 20)</li> </ul>	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R 240.00
Applicant	Application for a temporary licence to deal in arms and ammunition and to exhibit (Section 36)	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R 480.00
Applicant	<p>Renewal of dealer's licence:</p> <ul style="list-style-type: none"> <li>Licence is valid for one year (Section 35)</li> </ul> <p>Renewal of manufacturer's licence:</p> <ul style="list-style-type: none"> <li>Licence is valid for one year (Section 49)</li> </ul> <p>Renewal of gunsmith's licence:</p> <ul style="list-style-type: none"> <li>Licence is valid for one year (Section 63)</li> </ul>	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R 600.00
Applicant	<p>Application for a firearm dealers licence (section 34)</p> <p>Licence to conduct business as a gunsmith (paper licence) (Section 60)</p> <p>Licence to manufacture firearms and / or ammunition (paper licence): (Section 45)</p> <ul style="list-style-type: none"> <li>To manufacture firearms, or</li> <li>To manufacture ammunition, or</li> <li>To manufacture firearms and ammunition</li> </ul>	Revenue stamp, affixed in SAPS 86 register at the submission of the applications / cash / bank guaranteed cheque	R1 200.00

**Dog ate your Gazette?  
... read it online**



**www.SA Gazettes.co.za**  
.....

**A new information Portal keeping you up to date with news, legislation, the Parliamentary programme and which is the largest pool of SA Gazette information available on the Web.**

- Easily accessible through the www!
  - Government Gazettes - from January 1994
  - Compilations of all Indexes pertaining to the past week's Government Gazettes
  - All Provincial Gazettes - from September 1995
  - Parliamentary Bills - as of January 1999
- Available in full-text, with keyword searching
- Sabinet Online scans, formats, edits and organize information for you. Diagrams and forms included as images.
- No stacks of printed gazettes - all on computer. Think of the storage space you save.
- Offers Bill Tracker - complementing the SA Gazettes products.

**For easy electronic access to full-text gazette info, subscribe to the SA Gazettes from Sabinet Online. Please visit us at [www.sagazettes.co.za](http://www.sagazettes.co.za)**

**Sabinet**  
 *Online*

# IMPORTANT NOTICE

The  
**Gauteng Provincial Gazette** Function  
will be transferred to the  
**Government Printer** in Pretoria  
as from 2nd January 2002

**NEW PARTICULARS ARE AS FOLLOWS:****Physical address:**

Government Printing Works  
149 Bosman Street  
Pretoria

**Postal address:**

Private Bag X85  
Pretoria  
0001

**New contact persons:** Awie van Zyl Tel.: (012) 334-4523  
Mrs H. Wolmarans Tel.: (012) 334-4591

**Fax number:** (012) 323-8805

**E-mail address:** awvanzyl@print.pwv.gov.za

**Contact persons for subscribers:**

Mrs S. M. Milanzi Tel.: (012) 334-4734  
Mrs J. Wehmeyer Tel.: (012) 334-4753  
Fax.: (012) 323-9574

This phase-in period is to commence from **November 2001** (suggest date of advert) and notice comes into operation as from **2 January 2002**.

Subscribers and all other stakeholders are advised to send their advertisements directly to the **Government Printing Works**, two weeks before the 2nd January 2002.

*In future, adverts have to be paid in advance  
before being published in the Gazette.*

**HENNIE MALAN**

Director: Financial Management  
Office of the Premier (Gauteng)



*Looking for back copies and out of print issues of  
the Government Gazette and Provincial Gazettes?*

## The National Library of SA has them!

Let us make your day with the information you need ...

National Library of SA, Pretoria Division

PO Box 397

0001 PRETORIA

Tel.:(012) 321-8931, Fax: (012) 325-5984

E-mail: [infodesk@nlsa.ac.za](mailto:infodesk@nlsa.ac.za)



*Soek u ou kopieë en uit druk uitgawes van die  
Staatskoerant en Provinsiale Koerante?*

## Die Nasionale Biblioteek van SA het hulle!

Met ons hoef u nie te sukkel om inligting te bekom nie ...

Nasionale Biblioteek van SA, Pretoria Divisie

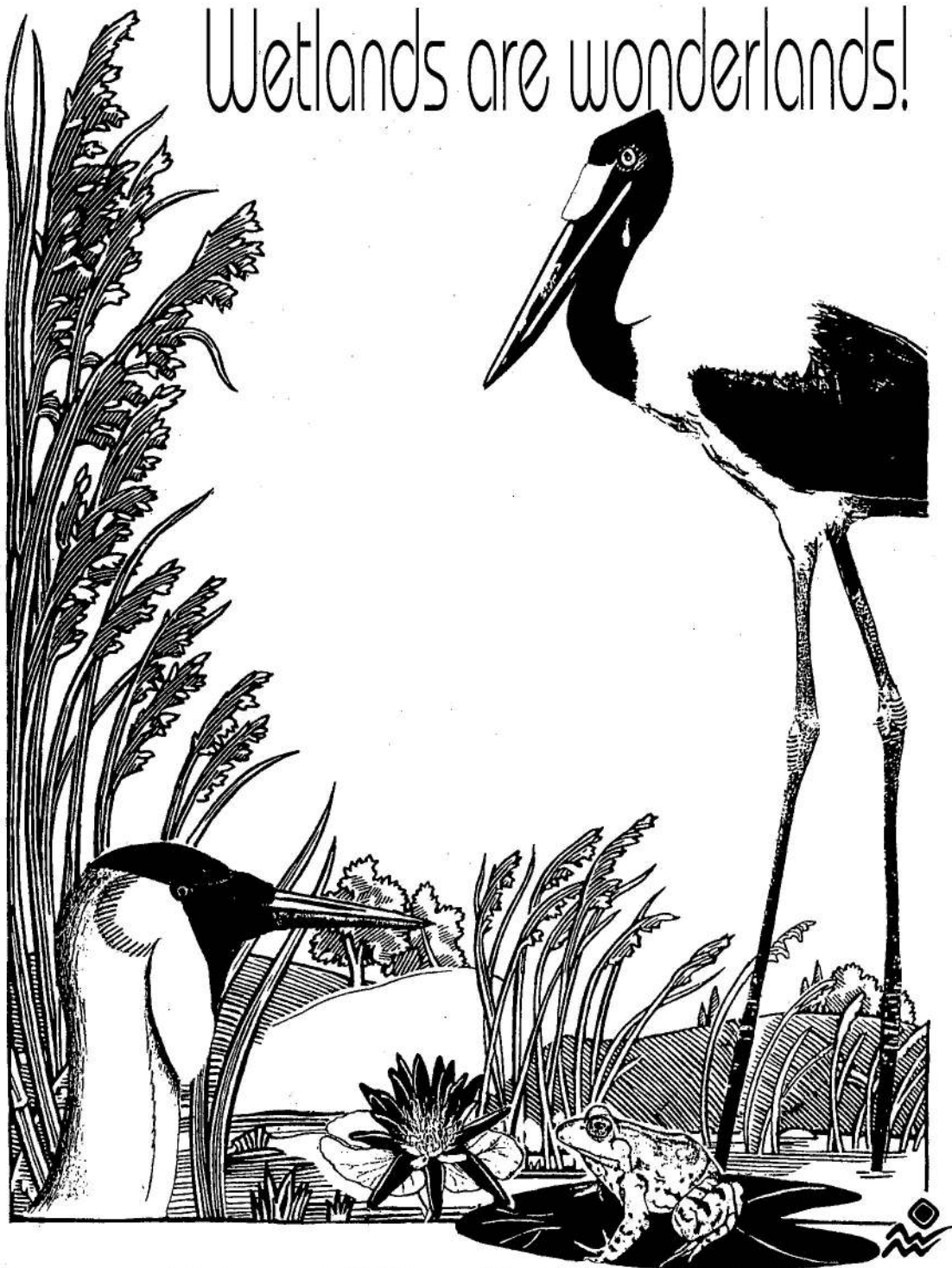
Posbus 397

0001 PRETORIA

Tel.:(012) 321-8931, Faks: (012) 325-5984

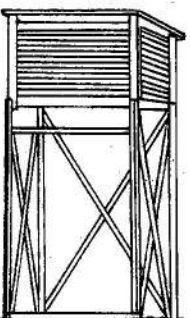
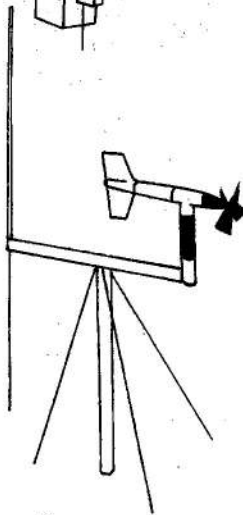
E-pos: [infodesk@nlsa.ac.za](mailto:infodesk@nlsa.ac.za)

Wetlands are wonderlands!

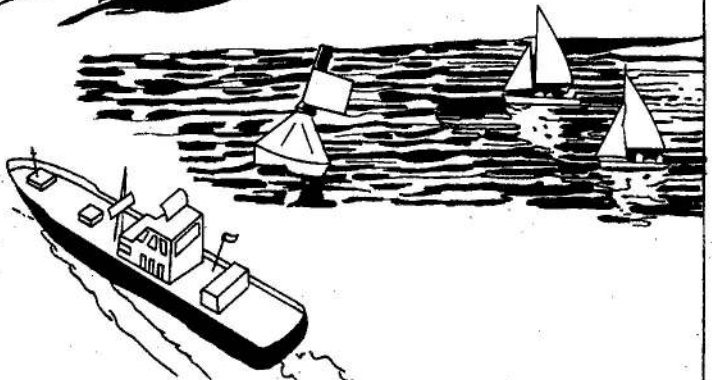
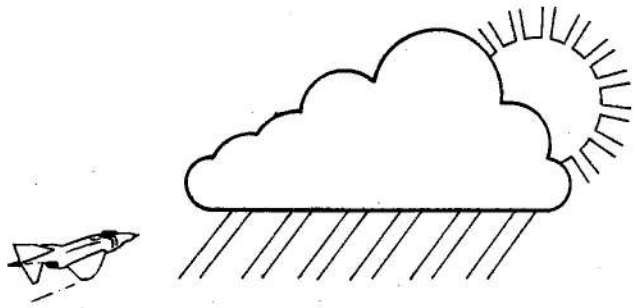


Department of Environmental Affairs and Tourism



**SA WEATHER BUREAU SA WEERBURO**

**W  
E  
A  
T  
H  
E  
R  
·  
S  
E  
R  
V  
I  
C  
E  
S  
·  
W  
E  
E  
R  
D  
I  
E  
N  
S  
T  
E**



Printed by and obtainable from the Government Printer, Bosman Street, Private Bag X85, Pretoria, 0001  
Publications: Tel: (012) 334-4508, 334-4509, 334-4510  
Advertisements: Tel: (012) 334-4673, 334-4674, 334-4504  
Subscriptions: Tel: (012) 334-4735, 334-4736, 334-4737  
Cape Town Branch: Tel: (021) 465-7531

Gedruk deur en verkrygbaar by die Staatsdrukker, Bosmanstraat, Privaatsak X85, Pretoria, 0001  
Publikasies: Tel: (012) 334-4508, 334-4509, 334-4510  
Advertensies: Tel: (012) 334-4673, 334-4674, 334-4504  
Subskripsies: Tel: (012) 334-4735, 334-4736, 334-4737  
Kaapstad-tak: Tel: (021) 465-7531