

Form 17
APPLICATION FOR ARMS LICENCE
(reg. 19)
REPUBLIC OF BOTSWANA
ARMS AND AMMUNITION ACT
(Cap. 24:01)

(To be submitted in duplicate to the Licensing officer)

Application for Arms Licensing to the Licensing Officer at.....

.....
.....

I,.....

(Full names, underline surname)

of ID/Passport No.....

Postal address.....

holder of Registration Certificate No.....

calibre.....Serial no.....

hereby apply for an Arms Licence/Renewal for the year 20

Date Stamp:

.....

Signature

Fee paid: P

O.R. No.

Licensing Officer's comments:

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.....
.....

Date Stamp:

Arms Licence No.

.....

Signature of Licensing Officer