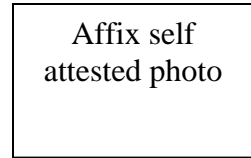


**AFFIDAVIT**  
(For fresh Arms License)



(Specimen of affidavit to be submitted by applicants on non-judicial stamp paper of worth Rs. 10/- duly attested by a Notary Public. Please fill all details with due care because your case will be processed on the basis of the information provided by you vide this affidavit).

I, \_\_\_\_\_ Son/Daughter/Wife of \_\_\_\_\_ presently residing at \_\_\_\_\_ since \_\_\_\_\_ do solemnly affirm and declare as follows:

1. That my date of birth is \_\_\_\_\_ (nineteenth-----) and place of birth is \_\_\_\_\_. ( copy of proof attached)

2. That my educational qualification is \_\_\_\_\_

3. That I am married/unmarried to \_\_\_\_\_ and that I have \_\_\_\_ children namely \_\_\_\_\_ age about \_\_\_\_\_

4. That I am permanent resident of \_\_\_\_\_.

5. That I am running a private business (copy of registration certificate or sales/service tax deposit slip or MCD/NDMC/ Cantt. Board Trade license which are attached) whose detail is as under :-

a) Name & Address of business: - \_\_\_\_\_  
(Proprietorship, Private Limited or Limited Company)

b) Number of employees

a. Skilled/technical: -

b. Literate: -

c. Semi literate (below 10th Class): -

d. Illiterate: -

(c) No of shops/branches with address

6. That I am a professional ( Doctor, Lawyer, Architect, Engineers, Chartered Accountant etc. (Copy of registration certificate attached)

I. Name & Address of firm:- \_\_\_\_\_

II. Number of employees

a. Skilled/technical: -

b. Literate: -

c. Semi literate (below 10th Class): -

d. Illiterate: -

7. That I am working /serving as \_\_\_\_\_ in the department of \_\_\_\_\_. I have attached the NOC issued by my department regarding obtaining an arm license. (**In case of Army personnel** attach photocopy of I/card and serving cum residential certificate issued by the department) or (In case of security guard submit an undertaking from his employer (FA-56)). Affix self attested photo

8. That my annual income is Rs. \_\_\_\_\_ ( attach proof of salary slip/Income Tax Return) & daily cash transaction is Rs. \_\_\_\_\_. (attach documentary proof) .
9. That I am not a short tempered man in family, neighbours, employees, and friends.
10. That I am medically fit to handle the weapon ( A medical certificate issued by a registered MBBS Doctor attached (FA-17/02)).
11. That I am/was not involved in any criminal case. That I do not have any departmental enquiry, vigilance proceedings against me or have faced a Court of enquiry, Board of enquiry under the Army, Navy & Air force Acts.
12. That I have never been externed from my place of stay by any judicial authority and neither am I a proclaimed offender of any state Govt. or of Delhi Police, and to the best of my knowledge there is no Red Corner Notice or any other Look Out notice pending against me.
13. That I have also no proceedings /cases instituted against me in the CBI, NCB, Enforcement Directorate, Directorate of Revenue Intelligence, Income Tax and Forest Department pending against me.
14. That I have also not been arrested, deported or involved in any illegal act in any other country where I have visited or resided.
15. That I have no arm license issued from any state in India. I have applied for an arm license previously\_\_\_\_\_ times.
16. That I will make requisite arrangements for keeping the fire arms in safe custody and to avoid access of children and other unauthorized persons to the fire arms.
17. That my father has given a consent to transfer his weapon in my name on inheritance basis (copy attached).
18. That my late father who was holding an arm license No \_\_\_\_\_ for NPB\_\_\_\_\_ expired on \_\_\_\_\_ and I intend to get the transfer of weapon in my name. The other legal heirs have given NOCs that they have no objection if the weapon is transferred in my name which is/are attached (FA-33).
19. That I require an arm license because (Give full details)\_\_\_\_\_

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The particulars furnished by me above are true & correct to the belief of my knowledge and I have not concealed or misrepresented any facts.

**DEPONENT**

**ATTESTED**

Witness (Name,Address &Signature)

Signature and official seal of notary public