

**FORM OF APPLICATION FOR RENEWAL OF ARMS LICENSE,
EXTENSION OF PERIOD TO PRODUCE WEAPON**

1. Name of the Licensee _____
2. Father's name _____
3. Address _____

4. License No. _____
5. Occupation _____
6. Date of Birth _____
7. Purpose of Submission :-

(i) Renewal _____

(ii) Extension of period to produce weapon _____
8. Date on which the validity of renewal/purchase period expired _____

9. Made and Number of the weapon _____
10. In case the renewal has not been applied in time the reason thereof _____

11. The reason for not purchasing the weapon _____

12. Is your arm presently deposited with Police Station/Arms Dealers, if so, why?

It is certified that the above particulars are correct and in case of any wrong information, my license liable to be suspended/cancelled. License is enclosed.

Date :

Signature of the Applicant:

FOR POLICE USE ONLY

1. License No. according to Computer
Code : _____
2. May be renewed up
to : _____
3. P.P. may be extended upto : _____

Receptionist

ACP/License

I/C Computer