

Royal Canadian Gendarmerie royale Mounted Police du Canada

Non-resident Firearm Declaration

			name of the forest passes of the company of the com					
A - Personal Info	rmation							
1. a) Last Name			1. b) First Name					
1. c) Middle Name		2 Date of Birth	John 2. Date of Birth (yyyy-mm-dd)		2 Condo			
		2. Date of Birtin			Male	3. Gender Male Female		
	are staying in Canada f	or more than 60 days, provide	your address in Can	ada. If les	s than 60 days, provide	your residen		
outside Canada.					14 5) 5-4	(11=:4		
4 a) Street / Land Locati			4. b) Apt. / Unit					
4. c) City 4. d) Provir		rovince / State	4. e) Country		4. f) Postal / Zip Code			
5. Photo Identification	(one piece required)							
5. a) Type of Identification	on	5. b) Province /	State / Country of Iss	ue	5. c) ID N	lo.		
Provide the reason for	r bringing firearms into	Canada						
		_	gainst wildlife	Other, s	specify			
B - Firearms	·							
7. Number of firearms in	ported							
3			Continuation	sheets at	ttached			
8. Destination of firear	ms in Canada							
8. a) Town		8. b) Province / Territory						
CANMORE	a) Torse of Fireness		ALBERTA					
Firearm No. 1	a) Type of Firearm Shotgun) Rifle () Combination	n gun 🔘 Handg	un 🕡	Other, specify AIR I	RIFLE		
b) Make	c) Seri		d) Gauge / Calib		e) Barrel		(mm	
FEINWERKBAU			4,5mm /.177		425		in	
f) Action					(9)			
0		Pump Semi-automatic	Other, spec	cify				
		ve the following information:	h) Evaluation Det					
g) Authorization to Trans	sport No.		h) Expiration Dat	е (уууу-п	im-aa)			
Fire No. 0	a) Type of Firearm				7			
Firearm No. 2	O Shotgun	Rifle Combination	n gun 🔘 Handg	un 🔘	Other, specify			
b) Make	c) Seri	al No.	d) Gauge / Calibi	re	e) Barrel	Length	Q mm	
							() in	
f) Action Break Open Break Open	Bolt O Lever O	Pump () Semi-automatic	Other, spec	cify				
		ve the following information:	O duisi, spa					
g) Authorization to Trans	sport No.		h) Expiration Dat	e (yyyy-m	m-dd)			
Firearm No. 3	a) Type of Firearm) D	O					
h) Maka	Shotgun (c) Seri	Rifle Combination			Other, specify	T		
b) Make	c) Sen	ai No.	d) Gauge / Calibi	e	e) Barrer	Length	O mm	
f) Action	I	, , , , , , , , , , , , , , , , , , , ,						
Break Open Bolt Lever Pump Semi-automat			Other, specify					
		ve the following information:						
g) Authorization to Trans	port No.		h) Expiration Dat	e (yyyy-m	m-dd)			
C - Declaration								
	mation provided on this	form and any attachments is	true and correct to th	e best of	my knowledge. It is an	offence und	or coction 106 o	
the Firearms Act to kno	owingly make a false	or misleading statement, eit	her orally or in writii	ng, or to l	knowingly fail to discle	ose relevant	information, for	
tne purpose of obtaining	ng the confirmation of	a document by a customs	officer.					
		Applicant's Signature		Control Control	(yyyy-mm-dd)			
D - Confirmation	ces Agency or Cu							
10 a) Confirmation No. 10. b) Date of Issue (yyyy-mm-dd)				10. c)	10. c) Date of Expiration (yyyy-mm-dd)			
11. Class of Individual				12. a) Payment - Received Date (yyyy-mm-dd)				
() Visitor () Seasonal () Temporary			○ Settler	Settler				
12. a) Payment - Expirati	<u> </u>	13. Customs Off			14. Customs Officer	r Signature		
	1 The second of							
E - Additional Co	nfirmation Num	bers (To be completed	by Canada Borde	r Servic	es Agency or Custo	ms Officer)	
Issue Date	Expiration Date	Confirmation No.	Customs Off	icer	Badge No.	o. Customs Office		
(yyyy-mm-dd)	(yyyy-mm-dd)		Initials					
	01	Client Please vetein this as	000		C 2 CEO			