



## INFORMATION SHEET

### Firearms Documents Replacement Request

#### **BEFORE YOU START...**

**USE THIS FORM** if you are an individual or a business to request the replacement of documents issued under the *Firearms Act*.

**LOST, STOLEN OR DESTROYED FAC's** will be replaced by a firearms licence card.

**THE APPLICABLE REPLACEMENT FEE FOR EACH DOCUMENT TYPE** is listed in Section D, Box 11 of the form.

#### **REGISTRATION CERTIFICATE REPLACEMENT FEE -**

The replacement fee for registration certificates is \$10 for up to every four replacement certificates you require. (See Section D - Document Replacement Information). Note: plastic registration certificate cards will be replaced by paper registration certificates.

**FEE EXCEPTION** - If the Chief Firearms Officer of your province or territory determined that a fee waiver applied because you need firearms to hunt or trap in order to sustain yourself or your family, the fee is also waived for replacing a licence with non-restricted privileges or a registration certificate for a non-restricted firearm. The fee waiver does not apply to the replacement of a firearms licence with restricted or prohibited privileges or a registration certificate for a restricted or prohibited firearm.

**YOU MUST REPORT THE LOSS OR THEFT OF A FIREARMS DOCUMENT TO EITHER THE CHIEF FIREARMS OFFICER OF YOUR PROVINCE OR TERRITORY OR TO YOUR LOCAL POLICE.**

**IF YOU NEED HELP COMPLETING THIS APPLICATION FORM** or require another form, call 1 800 731-4000. Additional information and some application forms are also available on our Web site at [www.cfc-cafc.gc.ca](http://www.cfc-cafc.gc.ca).

The following information explains certain parts of the form and will help you answer some of the questions. You should read the instructions as you fill in your form. If you are still unsure about a question, call 1 800 731-4000 for assistance.

Mail your completed application form and all attachment(s) to:

**Central Processing Site**  
P.O. Box 1200  
Miramichi, N.B. E1N 5Z3

#### **A - APPLICANT INFORMATION**

##### **Box 1**

If you are an individual requesting replacement documents, provide your firearms licence number in Box 1 (if known).

If you are requesting replacement documents on behalf of a business provide the business firearms licence number in Box 1 (if known).

##### **Boxes 2 a) to d)**

If you are an individual requesting replacement documents, provide your name, and date of birth in Boxes 2 a) to d).

If you are a business requesting replacement documents, provide your business representative's name and date of birth in Boxes 2 a) to d)

##### **Box 2 e)**

If you are an individual requesting replacement of your firearms licence and the number is unknown, provide your place of birth in Box 2 e).

If you are applying on behalf of a business, leave Box 2 e) blank.

#### **B - FEES**

##### **Box 5**

Total the fee amounts indicated in the column under Section D, Box 11 and transfer the total into Section B, Box 5.

### Fee Exceptions

If you are requesting replacement of your firearms licence with non-restricted privileges and the Chief Firearms Officer of your province or territory determined that a fee waiver applied because you need the firearms to hunt or trap in order to sustain yourself or your family, then the fee is also waived for replacing your licence and your registration certificates for non-restricted firearms. The fee waiver does not apply to replacement of a firearms licence with restricted or prohibited privileges or to registration certificates for restricted or prohibited firearms.

### Boxes 6 - 9

Indicate the method of payment. Do not send cash. Make your cheque or money order payable to the Receiver General for Canada.

**The fee is non-refundable.** Administrative fees and interest will be applied to all dishonoured payments.

Please note: If paying by personal cheque, please allow a minimum of ten (10) business days for bank clearance.

If you are not a resident of Canada and are paying by cheque or money order, please make your fee payable in Canadian dollars.

## C - DECLARATION

Individuals must sign and date the declaration. If you are a business or museum requesting replacement documents, the business or museum representative who completed the request must sign and date the declaration.

## D - DOCUMENT REPLACEMENT INFORMATION

### Box 10

Put an "X" in the box alongside the documents you need to replace.

### Box 11

The fee amount indicated in Box 11 is for the replacement of one (1) document only. The exception is the replacement fee for registration certificates. The replacement fee for registration certificates is \$10 for up to every four listed on a replacement request from. For example if you need to replace between:

- 1 and 4 registration certificates, the fee is **\$10**
- 5 and 8 registration certificates, the fee is **\$20**, etc.

If you need to replace more than four (4) registration certificates, either photocopy Section D or attach a separate sheet of paper to your application listing the information requested in Boxes 10, 11, 12 and 13.

### Box 12

Provide the document number in Box 12 if known. For example if you require a replacement for your firearms licence, provide the firearms licence number in Box 12.

### Box 13

Put an "X" in the appropriate box to indicate the reason for replacing the document.

### CHECKLIST

#### Before mailing your application, have you...

- ☐ answered all relevant questions?
- ☐ enclosed the appropriate fee?
- ☐ signed and dated the declaration ?

## FIREARMS DOCUMENTS REPLACEMENT REQUEST

### ATTENTION:

Read the Information Sheet for explanations. Use an "X" to indicate your answers (where required). Print clearly in blue or black ink.

### A APPLICANT INFORMATION

1. Firearms licence or business firearms licence number (if known)		2. a) Last name of individual or of business representative	
b) First name		c) Middle name	d) Date of birth (Y / M / D)
e) Individual's place of birth (if licence number is unknown)		3. Business, museum or carrier name (if applicable)	
<b>APPLICANT MAILING ADDRESS</b>			
4. a) Street / Rural Route / PO Box number		b) Apt. / Unit	c) City
d) Province / Territory	e) Country	f) Postal code	g) (Daytime) telephone number Extension ( ) -
h) (Evening) telephone number Extension ( ) -	i) Fax number (if applicable) ( ) -	j) E-mail address (if applicable)	

### B FEES (see Section D and Information Sheet)

5. Fee enclosed <b>\$ .00</b>	6. Indicate method of payment. <b>Do not send cash.</b> Make cheque or money order payable to <b>Receiver General for Canada.</b> <input type="checkbox"/> Cheque <input type="checkbox"/> Certified cheque <input type="checkbox"/> Money order <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard		
If paying by credit card, complete this section. ▶	7. Credit card number - - -	8. Expiry date /	9. Name appearing on credit card
I authorize the Canada Firearms Centre to charge to my credit card the amount shown in Box 5.			
Cardholder's signature		Date (Y / M / D)	

### C DECLARATION

It is an offence under section 106 of the *Firearms Act* to knowingly make a false or misleading statement, either orally or in writing, or to knowingly fail to disclose relevant information, for the purpose of obtaining a licence, registration certificate or authorization.

I declare that the information provided on this form and any attachment(s) is true and correct to the best of my knowledge.

Applicant's signature

Date (Y / M / D)

Information contained in this application is obtained under the authority of the *Firearms Act*. The information will be used to determine eligibility and to administer and enforce the firearms legislation. In addition to the provisions outlined in the *Firearms Act*, individual rights regarding personal information are governed by the applicable federal, provincial or territorial legislation relating to access to information and privacy.

Photocopy this page if you need to replace more than four (4) registration certificates.

For Administrative Use

**D DOCUMENT REPLACEMENT INFORMATION (see Information Sheet)**

10. Indicate document to be replaced	11. Fee	12. Document number (if known)	13. Indicate reason for replacement
<input type="checkbox"/> Firearms Acquisition Certificate (FAC)	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Firearms Licence - Possession Only	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Firearms Licence - Possession and Acquisition	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Firearms Licence - Minor	<b>\$10.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Firearms Licence (Business and Museum)	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Authorization to Transport	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Authorization to Carry	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> 60-Day Non-resident Confirmed Declaration	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> 1 Year Non-resident Confirmed Declaration	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Temporary Borrowing Licence	<b>\$25.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Authorization to Import	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Authorization to Export	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Shooting Club / Range Approval	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Gun Show Approval	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Public Service Agency Inventory Report	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Certificate - Instructor - Canadian Firearms Safety Course	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Certificate - Instructor - Canadian Restricted Firearms Safety Course	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Certificate - Master Instructor - Canadian Firearms Safety Course	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Certificate - Master Instructor - Canadian Restricted Firearms Safety Course	<b>\$0.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<input type="checkbox"/> Business / Museum Registration Certificate <input type="checkbox"/> Firearms Registration Certificate (See Information Sheet)	<b>\$10.00</b>		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
			<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
			<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
			<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Other - Specify ► _____
<b>TOTAL ► \$</b>		<b>Transfer the Total to Section B, Box 5.</b>	