



# Firearm and Baton Endorsement Application

WESTERN AUSTRALIA  
POLICE FORCE  
LICENSING SERVICES

## SECURITY AND RELATED ACTIVITIES (CONTROL) ACT 1996

### LICENSING ENFORCEMENT DIVISION

303 Sevenoaks Street Cannington, Western Australia 6107

Post: Locked Bag 9 East Perth WA 6892

Email: securitylicensing@police.wa.gov.au

Telephone: 1300 171 011

To apply for an endorsement, you must hold or be applying for a Security Officer's licence.

If you are currently subject to a Violence Restraining Order, you may not be eligible to obtain a firearm endorsement. Please contact Licensing Services for further information.

## Section 1. Personal Details

### LICENCE HOLDER DETAILS

Family Name

All Given Names

Date of Birth

DD/MM/YYYY

Gender

Driver's

Licence

### CONTACT ADDRESS - Postal

Unit / Street Number

Street  
Name

Street  
Type

Suburb

State

Postcode

### CONTACT ADDRESS - Residential

*Tick if Postal Address is the same as Residential Address*

Unit / Street Number

Street  
Name

Street  
Type

Suburb

State

Postcode

### CONTACT DETAILS

Mobile Phone

Other

Phone

Email

## Section 2. Endorsement Details

Security Officer's Licence Number

Firearm

Baton

## Section 3. Firearm Endorsement Employer Details

Include all companies who wish to employ you to carry a firearm. A letter must be attached from each company that wishes to employ you in an armed capacity.

Company Name 1

Corporate Firearm  
Licence Number

Type of firearm:

Semi-automatic

Revolver

Company Name 2

Corporate Firearm  
Licence Number

Type of firearm:

Semi-automatic

Revolver



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## Section 4. Baton Endorsement Employer Details

Include all companies who wish to employ you to carry a baton. A letter must be attached from each company that wishes to employ you in an armed capacity.

Company Name 1

Baton Serial  
Number

Type of baton:      Rigid      Extendable

Owner of baton

Storage location  
of baton

Company Name 2

Baton Serial  
Number

Type of baton:      Rigid      Extendable

Owner of baton

Storage location  
of baton

## Section 5. Declaration

I certify that the information contained in this application has been provided by myself and is true and correct in every particular and that I completed this application in my own handwriting. I am aware that it is an offence under Section 51 of the Security and Related Activities (Control) Act, 1996 to provide false or misleading information.

Applicant's Full Name

Applicant's  
Signature

Date

Witness Full Name

Witness  
Signature

Date

### **FIREARM ENDORSEMENT MEDICAL CERTIFICATE**

Applicants for a firearm endorsement must provide a medical certificate certifying they are fit to carry a firearm.

The certificate must state it is the opinion of the medical practitioner that the person is physically and psychologically fit to be in possession of a firearm and is to include the examination of the persons hearing and vision. It must also state the period of time the medical practitioner has known the person.

All medical certificates provided must be dated within one month of being prepared by the medical practitioner.