**APPLICATION: ENDORSEMENT SECTION 20 FIREARMS APPLICATION MOTIVATION**

 **CPHC-SA SAPS Accreditation Number: 1300141  
Email: admin@cphc-sa.co.za | Website: http://www.cphc-sa.co.za**

Please Note: Your motivation for an application for a license must accompany this application

|  |  |
| --- | --- |
| **Application for Endorsement of a motivation for firearm licence application in terms of Section 20 (Business Purposes)** | |
| **COMPANY DETAILS** | |
| **Company Name & Reg Nr:** |  |
| **Contact Person: Surname** |  |
| **Contact Person: Full Names** |  |
| **Identity Number** |  |
| **Custodians Member No:** |  |
| **Residential Address** |  |
| **Postal Address** |  |
| **Company telephone nr:** |  |
| **Company cell nr:** |  |
| **Contact person cell nr:** |  |
| **E-mail address & Website** |  |

**List the calibres of all the firearms for which you are applying for firearm licences under Section 20 (Business Purposes)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Caliber | Manufacturer | Type of firearm | Action | Serial Number |
| Revolver, Pistol, Rifle, Shotgun | Semi-automatic, Bolt, Lever, Pump, etc. |
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|  |  |  |  |  |

**Are you a Hunting Outfitter (only)? \_\_\_\_\_\_\_**

**Are you a Professional Hunter and Hunting Outfitter? \_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Copy of motivation attached** |  |
| **Confirmation of current provincial HO Licence (please attach)** |  |

Declaration  
I hereby confirm that CPHC-SA (Custodians of Professional Hunting & Conservation South Africa) will not be responsible of writing or rewriting my motivation/s for application for firearm licence/s as listed above. Upon reviewing my submitted motivations, CPHC-SA will either issue an endorsement regarding the purpose and suitability of the firearms, or inform me of the reasons why they cannot endorse the motivations.  
  
I hereby declare that the information given in this document and any attachments hereto is the truth.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

|  |  |
| --- | --- |
| **For Office Use:** | |
| **Date: Request for endorsement received** | Endorsed / Not endorsed |
| **Date: Endorsement emailed to applicant** | If not endorsed: reason and date of communication to member: |
| **CEO/Chairman Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |