

## Occupational Disclosure Professional Shooter

WESTERN AUSTRALIA
POLICE FORCE
LICENSING SERVICES

## LICENSING ENFORCEMENT DIVISION

303 Sevenoaks Street Cannington, Western Australia 6107
Post: Locked Bag 9 East Perth WA 6892
Email: LicensingServices@police.wa.gov.au
Telephone: 1300 171 011

This document is only applicable when submitted as a supporting document to an application.

This document supports an Occupational Use - Professional Shooter Application.

COMPLETE FORM IN CAPITAL LETTERS

Applicant Details					
Family Name				Date of Birth DD/MM/YYYY	
All Given Names					
Mobile Phone		Business Phone		Other Phone	
Email			Firearms Licence No.		Expiry Date
Unit / Lot / Level	Street Number	Street Name			
Street Type	Suburb			State	Postcode

## **Property Details**

Occupation

Length of time in Months/
Occupation Years

Department of Expiry
Biodiversity, Date

Conservation
and Attractions

Species

Licence Number

## **Declaration**



For this application to be considered, you must attach a copy of your Department of Biodiversity, Conservation and Attractions Licence, including a list of approved properties to your application.

Applicant Signature

Date