

**NDAL-National Database of Arms Licence
DATA INPUT SHEET: INDIVIDUAL**

Unique Case File:

(Official Use Only)

Affix Recent
Photo of
Licencee

LICENCEE PARTICULAR – INDIVIDUAL

Name*:		Dt. Birth*: DD/MM/YYYY
Gender*: Male/Female	Occupation/Profession*:	

[Select Occupation/Profession from: 1. Government Services 2. Private Services 3. Business 4. Agriculturist 5. Sports Person 6. Professional 7. Self Employed 8. House Wife 9. Retired 10. Others (Specify)]

Parent/Spouse Name*:		Country*: INDIA Birth State*:
Birth District*:	Taluk*:	Village*:
Phone No. (O):	(R):	Mobile:
Email:		

Present Address

Address*:	Village*:
	Taluk*:
	District*:
	State: Kerala Country: INDIA
PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Present Police Station Address

Police Station*:

Permanent Address

Tick whether the permanent address is same as present address else fills up the following.

Address*:	Village*:
	Taluk*:
	District*:
	State*: Country: INDIA
PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Permanent Police Station Address

Police Station Local*:	Police Station Permanent Address: (Specify If not under local jurisdiction)
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LICENCE ISSUED/RENEWED BY LOCAL AUTHORITY (Only last updated record)

Licence No*:	Date of Issue*: DD/MM/YYYY
VALIDITY PERIOD FROM*: DD/MM/YYYY TO*: DD/MM/YYYY	AREA OF VALIDITY*:
Dt. Area Validity if any: DD/MM/YYYY	AREA VALIDITY: 01-DISTRICT 02-STATE 03-THREE ADJOINING STATES 04-ALL INDIA 05-OTHERS
Description: (Purpose..etc):	

LICENCE ISSUED/RENEWED BY OUTSIDE AUTHORITY

Licence Number of local authority (if issued): Yes/No	
Original Licence No*:	Dt. Issue Original Licence *: DD/MM/YYYY
VALIDITY PERIOD FROM*: DD/MM/YYYY TO*: DD/MM/YYYY	AREA OF VALIDITY*:
Dt. Area Validity if any: DD/MM/YYYY	AREA VALIDITY:: 01-DISTRICT 02-STATE 03-THREE ADJOINING STATES 04-ALL INDIA 05-OTHERS
Description: (Purpose..etc):	

ADDITIONAL INFORMATION IN CASE OF LICENCE ISSUED BY OUTSIDE AUTHORITY:

Address at the time of issuance of Original Licence:	District:
	State:
	PIN: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Original issuing Authority (DM/CoP)*:	
Last Renewing Authority other than Original Issuing Authority (Prior to Local Registration) Last Renewing Authority1: _____ If more than one renewal done by authority other then Original Licensing Authority: Yes/No If Yes, Give Last Renewing Authority 2: _____	

INDIVIDUAL WEAPON DETAIL

Total No. of Weapons Endorsed* (Max.:3): One/Two/Three			
1.	Weapon Category*: PB/NPB	Weapon Type*: Carbine/Gun/Revolver-Pistol/Rifle/Short Pistol	
Bore*:	Make*:	Weapon No*:	
Maximum No Cartridges Allowed*:		No. of Cartridges allowed to keep at a time:	
Restrictions, if any	YES/NO	Life Time Restriction (Tick)	Date of Restriction up to
NSP Weapon:		-----	-----
To Sell by Ordnance Factory :		-----	DD/MM/YYYY
To Sell by State Fire Arms Bureau:			DD/MM/YYYY
Imported Weapons:			DD/MM/YYYY
2.	Weapon Category*: PB/NPB	Weapon Type*: Carbine/Gun/Revolver-Pistol/Rifle/Short Pistol	
Bore*:	Make*:	Weapon No*:	
Maximum No Cartridges Allowed*:		No. of Cartridges allowed to keep at a time:	
Restrictions, if any	YES/NO	Life Time Restriction (Tick)	Date of Restriction up to
NSP Weapon:		-----	-----
To Sell by Ordnance Factory :		-----	DD/MM/YYYY
To Sell by State Fire Arms Bureau:			DD/MM/YYYY
Imported Weapons:			DD/MM/YYYY
3.	Weapon Category*: PB/NPB	Weapon Type*: Carbine/Gun/Revolver-Pistol/Rifle/Short Pistol	
Bore*:	Make*:	Weapon No*:	
Maximum No Cartridges Allowed*:		No. of Cartridges allowed to keep at a time:	
Restrictions, if any	YES/NO	Life Time Restriction (Tick)	Date of Restriction up to
NSP Weapon:		-----	-----
To Sell by Ordnance Factory :		-----	DD/MM/YYYY
To Sell by State Fire Arms Bureau:			DD/MM/YYYY
Imported Weapons:			DD/MM/YYYY

It is declared that the information furnished above is true to the best of my knowledge and belief.

Place:

Date:

Signature with Name:

INSTRUCTIONS: Please do not leave Fields marked with *, which are mandatory. In case of License Issued by Local Authority, please strike off the block containing input fields for 'License Issued by Outside Authority' and vice-versa. If only one weapon is endorsed to the license holder, please skip the subsequent input columns meant for capturing multiple weapons details issued to the licensee.

NOTE: *If multiple licences are issued to a single person, then furnish such licence details in separate sheet. Documentary Proofs may be required for Date of Birth, Address & any other specified details decided by District Administration*