PERMIT TO CARRY FIREARMS OUTSIDE OF RESIDENCE (PTCFOR) APPLICATION FORM

(To be filled out by PTCFOR Personnel only)

PERMIT CONTROL NO.: ___ ___ ___ - ___ ___ ___ ___ ___ ___ - ___ ___ ___ ___ - ___

TYPE OF APPLICATION
- ☐ NEW
- ☐ RENEWAL

(To be completely and legibly filled out by the applicant)

DATE: Day ___ / Month ___ / Year ___

PERSONAL INFORMATION

Last Name:

First Name

Middle Name: **Qualifier:**

Date of Birth Day ___ / Month ___ / Year ___ **Gender:** M ☐ F ☐

Contact/Mobile No.: **TIN:** ___ ___ ___ - ___ ___ ___ - ___ ___ ___

Primary Address:

Unit No./Bldg:

Street:

Barangay:

City/Municipality:

Region: **Postal Code:**

Contact/Mobile No.:

Qualification:
- ☐ Active LEA _____
- ☐ Retired LEA _____
- ☐ Active Government Employee
- ☐ Retired Government Employee
- ☐ Senior Citizen
- ☐ Incumbent Elected Official
- ☐ Military Reservist
- ☐ Businessman
- ☐ Civilian
- ☐ Religious Leader
- ☐ Others _____

Firearms Details:

Serial No.:

Kind:

Make: **Caliber:**

License Control No.:

AFFIDAVIT OF UNDERTAKING

I HEREBY CERTIFY that all the statements herein are true and correct. I further certify that I have no criminal conviction or pending criminal/administrative case before any court of law and administrative body as of this date, neither is the firearm described on my PTCFOR. I undertake to inform the C, PNP within five (5) days from knowledge of any case that may be filed against me.

I attest to the truthfulness of the above statements and hereby affix my thumbmark and signature on this _____ day of _____, at Camp BGen Rafael T Crame, Quezon City.

I shall hold myself liable of perjury for any misrepresentation pertaining to this application.

2 x 2 PHOTO
WHITE BACKGROUND

_____

SIGNATURE ABOVE PRINTED NAME

SUBSCRIBE AND SWORN to before me this _____ day of _____, applicant exhibited to me his/her attached proof of identity

Doc No.:_____

Page No.:_____

Book No.:_____

Series of 20_____

_____

NOTARY PUBLIC

SUBSCRIBE AND SWORN to before me this _____ day of _____, applicant exhibited to me his/her attached proof of identity

RIGHT THUMBMARK
(Roll thumbprint from left to right)

RECOMMENDED BY:

JUDY JASMIN O PALICOS
Police Lieutenant Colonel
Chief, PTCFOR Secretariat

APPROVED / DISAPPROVED BY:

RODOLFO S AZURIN, JR
Police General
Chief, PNP