

Metropolitan Police Department

Firearms Registration Branch · 300 Indiana Ave NW, Room 3058 · Washington, DC 20001 · 202-727-4275

Instructions: A form is required for each used firearm registration application. In the space below please provide additional information for any firearms that are used, or were not transferred or sold by a licensed dealer. Please provide the seller / transferor of the firearm, contact information and address, as well as the date the firearm was obtained.

Seller/Transferor Information

Last Name	First Name	Middle Initial	
		<u> </u>	7/0.0.1
Street Address	City	State	ZIP Code
Phone Number			
Date the firearm was obtained (mm/dd/yyyy)		Location the firearm was obtained	
Please provide any additic	nal information on the	circumstances surrounding the sale/t	ransfer of this

Applicant Name

firearm:

Applicant's signature