



CENTRAL GAUTENG PISTOL ASSOCIATION

A member of South African Pistol Federation (SAPF): Accreditation Number 1300056

LETTER OF MOTIVATION FOR FIREARM APPLICATION

Surname: _____ Title: _____

Full names: _____

Identity number: _____

Residential Address: -

_____ Postal code: _____

Postal

Address: _____

_____ Postal code: _____

Telephone no –

Home: _____ Work: _____

Fax: _____ Cell: _____

E-Mail Address: _____

SAPA No: _____ Home Club: _____

DETAILS OF FIREARM AND PURPOSE OF USE

Type _____ Make _____

Serial Number: _____ Calibre _____

PURPOSE FOR WHICH FIREARM WILL BE USED

Furthermore, the Association wishes to endorse this application and confirms that the abovementioned individual is a fully paid member and is in good standing with the Association for the year 2026.

| Approved by: _____

