Bill of Sale

Per the NY SAFE Act, as of 03/15/2013, Private Sales between individuals are permitted only if a NICS check for the Buyer is provided. Exception: Private Sales between "Immediate Family," defined as Spouses, Domestic Partners, Children and Step-Children. If this exception applies, fill in the Affirmation of Relationship.

Seller's Information

Name: _____

Address: _____

Pistol License Number: _____

County and Date of Issue: _____

Gun Information

Make	Model	Serial #	Caliber	Auto or Rev.

I, the above-named Seller, do hereby sell the above weapon registered to me on my New York State pistol permit to the following Buyer:

Buyer's Information

Name: _____

Address: _____

Pistol License Number: _____

County and Date of Issue: _____

Affirmation of Relationship (if applicable; see above):

The Buyer is my _____, thus meeting the "Immediate Family" exception to the NICS Check requirement.

Seller's Signature: _____

Date: _____

Notary:

Executor Notarized Statement (Bill of Sale)

Per the NY SAFE Act, as of 03/15/2013, Private Sales between individuals are permitted only if a NICS check for the Buyer is provided. Exception: Private Sales between "Immediate Family," defined as Spouses, Domestic Partners, Children and Step-Children. If this exception applies, fill in the Affirmation of Relationship.

Name of Executor/Executrix: _____

Name of Deceased Permit-holder: _____

Deceased Permit-holder's Pistol License number: _____

County and Date of Issue of Pistol License: _____

Address of Deceased Permit-holder: _____

_____

	Make	Model	Serial #	Caliber	Auto/Rev.
1.					
2.					

I, the above-named Executor/Executrix of the Estate of the above-named Deceased Permit-holder, do hereby convey ownership of the above weapon(s) to the following:

Name: _____

Address: _____

_____

Pistol License Number: _____

County and Date of Issue of Pistol License: _____

Affirmation of Relationship: The Permit-holder to whom I am conveying the above weapon(s) is the Deceased Permit-holder's _____, thus meeting the "Immediate Family" exception to the NICS Check requirement.

Signature of Executor/Executrix:_____

Date: _____

Notary:

PPB-5 (REV. 6/14)

STATE OF NEW YORK
FIREARMS LICENSE AMENDMENT

NYSID # _____ DATE _____

LICENSE TO AMEND (check one):

☐ _____ COUNTY LICENSE OR ☐ NEW YORK STATE POLICE PISTOL LICENSE

NAME	DOB	NY DRIVER'S LICENSE NO. (or NY NON-DRIVER ID NO.)
STREET	CITY – TOWN - VILLAGE	COUNTY

PISTOL LICENSE NUMBER _____ DATE ISSUED _____

DUPLICATE LICENSE NUMBER _____ DATE ISSUED _____

TRANSFER LICENSE NUMBER _____ DATE ISSUED _____

TRANSFERRED FROM _____ DATE _____

TRANSFERRED TO _____ DATE _____

TRANSACTION TYPE(S) (check all that apply):

☐ ACQUIRED ☐ DISPOSED ☐ MOVED ☐ NAME CHANGE ☐ TRANSFER ☐ LOST/STOLEN FIREARM

☐ DUPLICATE ☐ SURRENDERED ☐ REVOKED ☐ DECEASED ☐ OTHER _____

AMEND LICENSE FOR THE FOLLOWING

1. NEW NAME _____
2. NEW ADDRESS _____
3. FOLLOWING WEAPON(S) AQUIRED FROM: (NAME, ADDRESS) _____

MAKE	REVOLVER OR AUTOMATIC	MODEL	CALIBER	SERIAL NUMBER

4. FOLLOWING WEAPON(S) DISPOSED TO: (NAME, ADDRESS) _____

MAKE	REVOLVER OR AUTOMATIC	MODEL	CALIBER	SERIAL NUMBER

5. FOLLOWING WEAPON(S) HAS BEEN: ☐ LOST ☐ STOLEN ☐ DESTROYED

   LAW ENFORCEMENT AGENCY REPORTED TO: _____

MAKE	REVOLVER OR AUTOMATIC	MODEL	CALIBER	SERIAL NUMBER

HAVE YOU BEEN ARRESTED, INDICTED, OR CONVICTED OF ANY CRIMINAL OFFENSE, BEEN THE SUBJECT OF AN ORDER OF PROTECTION, OR BEEN A PATIENT AT ANY MENTAL INSTITUTION SINCE THE ABOVE LICENSE WAS ISSUED? ☐ NO ☐ YES
IF YES, GIVE DETAILS ON REVERSE.

LICENSING OFFICER	SIGNATURE OF LICENSEE

LICENSEE'S CURRENT TELEPHONE #: _____