

## WEAPONS REGISTRATION REQUEST

### PRIVACY ACT STATEMENT

**AUTHORITY:** 10 USC 8013; Gun Control Act of 1968 (18 U.S.C. 922(d)(9) and (g)(9)/Lautenberg Amendment); and 44 U.S.C. 3101.

**PRINCIPAL PURPOSE:** To record personal information on an individual who registers and stores his or her privately-owned firearm and/or restricted weapon on a Marine Corps installation or facility. To maintain accountability of firearms, recorded when firearms are removed and returned to the facility, and determine the numbers and location of privately-owned firearms on an installation.

**ROUTINE USES:** Information may be disclosed to local, county, state and federal law enforcement/investigative authorities for investigation purpose.

**DISCLOSURE IS VOLUNTARY:** Failure to disclose the information will result in the individual not being able to register or store firearms and restricted weapons on the installation or facility. Attempt to keep firearms and restricted weapons on or off base that are not properly registered and stored could result in confiscation of the items, disciplinary action, or both. PRIVACY ACT - 1974 as Amended applies: This memo may contain information which must be protected IAW DoDD 5400.11, and it is For Official Use Only (FOUO).

REGISTRATION NO. ( <i>Assignment by PMO Customs</i> )	DATE
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<b>1. SPONSOR</b>				
Last Name	First Name	Middle	Rank	Rotation Tour Date
Organizational Address				Phone No.
Home address in Japan, Quarters, Room, Bldg, Camp				Phone No.

<b>2. WEAPON(S) TO BE REGISTERED</b>			
FIREARM(S) MAKE/MODEL	CALIBER	BARREL LENGTH	SERIAL#
KNIFE(S)/SWORD(S) TYPE	BLADE LENGTH	SINGLE/SEMI/DOUBLE EDGE	

<b>3. MISCELLANEOUS (i.e., RECREATIONAL BOWS, PAINTBALL GUNS, NUNCHAKUS, SAIS, TONFAS, THROWING STARS, KAMAS etc.)</b>	
Type	Type

OWNER CERTIFICATION: I certify that I have read and understand the provision in USFJ Instruction 31-207 and III MEF/MCIPACO 5500.1 concerning the possession, registration and storage of my privately owned weapon(s) and that I will comply therewith.

\_\_\_\_\_  
Signature of Owner

Date: \_\_\_\_\_

**MEMORANDUM ENDORSEMENT**

From: Commanding Officer, \_\_\_\_\_

To: Provost Marshal (Attn: Weapons Registration)

Subj: WEAPON(S) REGISTRATION for, \_\_\_\_\_

1. The owner's information set forth has been verified and is correct. Approval for storage of the weapon(s) in the unit armory/personal residence is granted and the weapon(s) will be stored in the below listed facility/address. A Firearms Permit from the Okinawa Public Safety Commission is required to store firearms in off base quarters. Privately owned firearms will not be stored in unaccompanied housing quarters or billeting.

2. Prior to departure from Japan or disposal of the weapon(s), the owner will be required to return this document to the Customs Section, Provost Marshal's Office, for deregistration and clearance. On the day of packing for a PCS move, this form will be shown to the TMO Customs Inspector who will accompany the owner to retrieve the weapon from the unit armory. TMO will not ship firearms; authorized firearms can only be shipped to the United States via U.S. Military Postal Service.

\_\_\_\_\_  
Storage Location

\_\_\_\_\_  
Commanding Officer's Signature

(In the case of martial art weapon). To be signed by the owner and weapons registration personnel.

I certify that I am an accredited instructor or student in the Martial Arts and possess a valid instructor or student card in order for me to have this/these weapon(s) registered or have in my possession at any time. If I do not possess an instructor/student card, I will obtain one prior to any attempt to move the weapon(s) from the armory for authorized purposes.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Rank/Unit

\_\_\_\_\_  
Owner's Signature

**CERTIFICATION OF CLEARANCE FOR WEAPON(S)**

Date: \_\_\_\_\_

The weapon(s) described hereon can be withdrawn from the unit armory for authorized sale (if sold, enter name and organization of new owner below), destruction by Commanding Officer or shipment to CONUS (attach copy of shipping document to this form). Martial Arts weapons may be withdrawn for authorized classes, authorized demonstrations or shipment. (HAND GUNS MAY NOT BE SOLD, TRADED OR GIVEN AWAY WHILE IN JAPAN).

BUYER:

\_\_\_\_\_  
(Commanding Officer's Signature)

Full Name: \_\_\_\_\_

\_\_\_\_\_  
(Weapons Registration Personnel)

Organization: \_\_\_\_\_