

Renewal of Explosives License or Permit

If you want to renew your explosives license or permit, you MUST file this renewal form BEFORE the expiration date shown below. WARNING: There are criminal penalties for continuing your explosives business or activity without renewing your license or permit. **YOU MUST COMPLETE AND SIGN THE RENEWAL QUESTIONNAIRE ON THE BACK OF THIS FORM.**

| | |
|--|-----------------------|
| Direct ATF Correspondence To Director, Industry Operations | License/Permit Number |
| | Expiration Date |

Name

Type of License/Permit

| | |
|----------------------------------|-------------|
| Use This Space to Correct Errors | Renewal Fee |
|----------------------------------|-------------|

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|--|--|
| Mail Your Fee (Payable to the Bureau of Alcohol, Tobacco, Firearms and Explosives) and this Form to ATF at: | Licensee or Permittee Mailing Address: |
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CAUTION: EXPLOSIVES LICENSES AND PERMITS ARE NOT TRANSFERABLE: IF THERE HAS BEEN A CHANGE IN THE OWNERSHIP OR CONTROL, OF THE EXPLOSIVES BUSINESS, YOU MAY NOT USE THIS FORM TO OBTAIN A RENEWED LICENSE OR PERMIT. Instead contact ATF for copies of ATF Form 5400.13/5400.16, application for license or permit. The following are examples of changes that necessitate the filing of an APPLICATION FOR LICENSE OR PERMIT: (1) a sole proprietorship changed to a partnership or to a corporation; (2) a partnership added or dropped one or more partners; (4) a person acquired more than 50% of the stock in an existing corporation. These examples are NOT meant to be all-inclusive.

RENEWAL INSTRUCTIONS

- 1. Examine the front of this form. If there are any errors, including an incorrect address, please cross out the wrong information and print the correct information in the space provided on the front of this form.
2. FILL OUT THE QUESTIONNAIRE BELOW AND SIGN AND DATE.

RENEWAL QUESTIONNAIRE

The following questions apply to you and (if the business or activity is a corporation, partnership or association) to any person who has the power to direct the management and policies of your explosives business or activity.

Form with 10 questions regarding legal status, convictions, and ownership. Includes a 'NOTE' section for questions 2 and 3 regarding sentencing guidelines.

Under the penalties imposed by 18 U.S.C. 844, I certify that the statements contained in this application and any attached statements are true and correct to the best of my knowledge and belief.

Signature _____ Date _____ Title _____ Current Telephone No. (____) _____
(owner, partner or officer of a corporation) area code

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection is used to determine location and extent of operations, and to determine whether the operations will be in conformity with Federal laws and regulations. The information requested is required to retain a benefit and is mandatory by statute (18 U.S.C. 843).

The estimated average burden associated with this collection is 20 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. ATF Form 5400.14/5400.15, Part III Revised ()

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Renewal Instructions

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Renewal Questionnaire

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