Polisen

APPLICATION

for permission to import firearms and ammunition into Sweden (Chap 2 Secs 11 and 12, Firearms Act)

553.12

Date

This application is to be filled in electronically and sent together with other application documents to:
weapon-arlanda.stockholm@polisen.se

Applicant

Date of birth	Surname	Given names

Address	Postal code	City

Telephone number (mobile)	Email address

Country	Nationality

Weapon

Type of weapon	Make	Model	Caliber	Serial number	Ammunition quantity

Inviter/Host ☐ Hunt ☒ Shooting competition

Personal identity number	Surname	Given names
09.01.1962	Taraldsson	Marianne

Address	Postal code	City
Svenska Skidskytteförbundet, Stadionvägen 7	831 58	Östersund

Telephone number (mobile)	Email address
+46 76 118 48 85	info@worldcupostersund.se

Country	Nationality
Sweden	Swedish

Place of hunting/competition	Date of arrival	Latest day of departure
Idre Fjäll | Östersund PLEASE WRITE DATE OF ARRIVAL DEPARTURE		

Attachment (Attached along with the application and submitted electronically via email)

☐ Invitation for hunt/competition ☐ A copy of the license to possess arms in the home country ☐ Copy of the European Firearms Pass

Place of arrival	Flightnumber	Time of arrival