**Application for Arms License Pursuant to the Security and
Defense Cooperation Agreement Between The United States of
America and The Islamic Republic of Afghanistan (BSA),
Dated 30 September 2014**

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| **Personal Details** |
| Title: | Gender: |
| Family Name: |
| Given Name: |
| Date of Birth: |
| Country of Birth: |
| Passport Country and Number: |
| **Contact Details** |
| Current Address: |
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|  |
| Email Address: |
| Personal Tel.: | Work Tel.: |

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| **Employment Details** |
| Current Occupation: |
| Employer’s Name: |
| Employer’s Address: |
|  |
| AISA License #: |
| **Weapon Specifications** |
| Type | Number | Other Specifications |
| **Contact Details** |
| Current Address: |
|  |
|  |
| Email Address: |
| Personal Tel.: | Work Tel.: |