



# STATE OF NEW JERSEY VOLUNTARY FORM OF FIREARMS REGISTRATION



(To register a firearm, **all** questions must be answered)

**Complete & make two additional copies**

*Should you have questions regarding this form, contact the New Jersey State Police, Firearms Investigation Unit,  
P.O. Box 7068, West Trenton, NJ 08628-0068, (609) 882-2000, ext. 2060 or 2061*

**You may not utilize this form to acquire firearms. This form may only be utilized to voluntarily register firearms you own that may be lawfully possessed in New Jersey that were previously acquired under any one of the following circumstances:**

1. Inherited pursuant to N.J.S.A. 2C:58-3j; **or**
2. Lawfully acquired in another state pursuant to state and federal laws (New Jersey residents **may not** acquire pistols/handguns outside of the State, however, any firearm previously acquired during your residency in another state may be brought to New Jersey as part of property moved to your New Jersey residence); **or**
3. Lawfully acquired in New Jersey pursuant to N.J.S.A. 2C:58-3b, rifles and/or shotguns previously acquired legally within New Jersey that you wish to have registered with the State. Handguns purchased/acquired in New Jersey via a State of New Jersey Permit to Purchase a Handgun & Form of Register (S.P. 671) will be registered upon submission of the white copy of form S.P. 671 to the New Jersey State Police, as required by N.J.S.A. 2C:58-3a, therefore the Voluntary Form of Firearms Registration, S.P. 650, is not required.

See Voluntary Form of Firearms Registration Instructions online prior to submitting form: [www.njsp.org/about/firearms.html](http://www.njsp.org/about/firearms.html).

## OWNER INFORMATION

Name: (Last, First, Middle)		Social Security Number:	SBI #:
Resident Address: Number & Street		City	State Zip Code
Date of Birth:	Age:	Home Telephone: (Include Area Code)	Work Telephone: (Include Area Code)
Firearms Purchaser I.D. Card Number (If applicable)		Diver's License Number & State:	

## FIREARMS INFORMATION (One form per firearm to be registered)

Manufacturer:	Model:	Caliber or Gauge:
Serial Number:	Type: <input type="radio"/> Revolver <input type="radio"/> Pistol <input type="radio"/> Rifle <input type="radio"/> Shotgun	
Other Marks of Identification:		

## SOURCE FROM WHICH YOU OBTAINED FIREARM

Name: (Person or Firearms Dealer)		Date Acquired:	SBI #: (If acquired from a private person)	
Address: Number & Street		City	State	Zip Code
Were you a resident of New Jersey when you acquired this firearm? <input type="radio"/> Yes <input type="radio"/> No	Was firearm acquired in NJ? <input type="radio"/> Yes <input type="radio"/> No	Was firearm acquired through a will? <input type="radio"/> Yes <input type="radio"/> No	Death of next of kin? <input type="radio"/> Yes <input type="radio"/> No	

The disclosure of my Social Security Number is voluntary. Without this number, the processing of my application may be delayed. This number is used for document tracking only and is considered confidential.

\_\_\_\_\_  
Signature of owner of firearm being registered

\_\_\_\_\_  
Date

Send original to Superintendent of State Police, copy to the chief of police of the municipality where you reside and owner to retain a copy.

*Additional forms may be obtained through the New Jersey State Police, Firearms Investigation Unit,  
P.O. Box 7068, West Trenton, NJ 08628-0068, or via the internet at [www.njsp.org/info/forms.html](http://www.njsp.org/info/forms.html).*