



CALIFORNIA DEPARTMENT OF JUSTICE
BUREAU OF FIREARMS
**FACILITY AND VEHICLE
SECURITY COMPLIANCE**



I have read and understand the California Code of Regulations, commencing with title 11, section 4140. I attest that the following statements are true and correct: (1) the phone number and physical address of all primary, and if applicable, secondary compliant storage locations; (2) the year, make, model, and vehicle identification or license plate number(s) of all security compliant vehicles and trailers; and (3) the locations and vehicles meet security requirements.

Vehicle Information

_____ Make	_____ Model	_____ Year	_____ Color	_____ VIN No.	_____ License Plate No.	_____ State
_____ Make	_____ Model	_____ Year	_____ Color	_____ VIN No.	_____ License Plate No.	_____ State
_____ Make	_____ Model	_____ Year	_____ Color	_____ VIN No.	_____ License Plate No.	_____ State

Storage Facility Information

_____ Storage Facility Business Name	_____ Storage Facility Address, City, State & Zip Code	_____ Telephone Number
_____ Storage Facility Business Name	_____ Storage Facility Address, City, State & Zip Code	_____ Telephone Number
_____ Storage Facility Business Name	_____ Storage Facility Address, City, State & Zip Code	_____ Telephone Number

Perjury Statement

I attest the above-listed vehicles and storage facility(ies) meet all the security requirements. (Cal. Code Regs., tit. 11, § 4141.) I acknowledge and understand that I must report any changes to the information provided above within ten (10) days to the Department of Justice (DOJ) on a new report of Security Compliance (form BOF 045). I understand that failure to adhere to the requirements of the California Code of Regulations constitutes grounds for revocation of my dangerous weapons license/permits. (Cal. Code Regs., tit. 11, §§ 4141, 4147, subd. (a)(5).)

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Print Name

Signature

Date

License/Permit Number(s)

Facility and Vehicle Security Compliance INSTRUCTIONS

REQUIREMENTS:

The Dangerous Weapons permit holder (permittee) must maintain this form for all vehicles and facilities where the dangerous weapons will be transported and stored in California. (Cal. Code Regs., tit. 11, § 4140, subd. (a).) Current records must be maintained on form BOF 045, or a computer generated printout using the same format. (Cal. Code Regs., tit. 11, § 4140, subd. (b)(1).) The permittee must make these records available to any peace officer or other persons designated by the Attorney General upon request. (Cal. Code Regs., tit. 11, § 4130, subd. (h).)

The permittee must submit any change to the storage facilities or transportation vehicles information with ten (10) days on a new Facility and Vehicle Security Compliance form. (Cal. Code Regs., tit. 11, § 4140, subd. (c).) A violation of this section establishes grounds for revocation. (Cal. Code Regs., tit. 11, § 4147, subd. (a)(5).) For a complete listing of security requirements, please refer to section 4141 or contact the Department of Justice, Bureau of Firearms at (916) 210-2300.

Completing the Facility and Vehicle Security Compliance form:

This form allows you to report up to three separate vehicles and storage facility locations. Make as many copies of this form as required to complete your reporting requirement. **Please complete the following fields for all entries:**

- | | |
|--------------------------------|---|
| - Vehicle Make | - Storage Facility Name |
| - Vehicle Model | - Storage Facility Address |
| - Vehicle Year | - Storage Facility Contact Telephone Number |
| - Vehicle Color | - Perjury Statement Signature |
| - Vehicle VIN | - Printed Name |
| - Vehicle License Plate Number | - Date |
| - Vehicle Licensing State | - Applicable License/Permit Numbers |

If you have any questions, please contact the Firearms Licensing and Permits Section (FLPS) at (916) 210-2751.

Department of Justice
Bureau of Firearms - FLPS
P.O. Box 160367
Sacramento, CA 95816-0367