## PERSONAL WEAPONS REGISTRATION

For reference, see JBM-HH Policy Memo ES-2; proponent is the Directorate of Emergency Services

**AUTHORITY**: 10 U.S.C. 3013; 44 U.S.C. 3101; AR 190-11, and JBM-HH Policy Memorandum ES-3

**PRINCIPLE PURPOSE**: To record personal information on an individual who registers and stores his privately owned weapon(s) on Fort Myer, Fort McNair, and Henderson Hall.

**ROUTINE USES:** To use as proof of registration and to maintain a record denoting an authorized storage location for firearms and other privately owned weapons. Routine use could include disclosure to other investigative authorities. SSN used for identification and retrieving data from files.

DISCLOSURE: Disclosure is voluntary; however, failure to disclose the information, to include SSN, will result in the individual not being allowed to register or store firearms and other privately owned weapons on Fort Myer, Fort McNair, and Henderson Hall. Attempts to keep firearms on Fort Myer, Fort McNair and Henderson Hall that are not properly registered and stored could result in confiscation, disciplinary action, or both.							
1. Name (Last				2. Rank		3. SSN	
4. Organization (complete unit/organization address)				5. Phone Number (duty and on-post quarters)			
6. The above named individual is authorized to store weapons in: (complete quarters address or identity and address of unit arms room):							
7. Weapon	8. Weapon	9. Make/Manufacturer	10. Caliber	11. Serial Number		pt of Armorer	
Number	Туре	and Model #	/ Gauge	(if applicable)	Date	Signature	
1							
2							
3							
4							
5							
In the row directly beneath the last weapon entry, type or print in ink, the words, //Last Item//. If more than							
one sheet is required to register weapons, complete anther JBM-HH Form 190-10 with signatures and dates.							
Individual's unit commander must sign this form prior to registration of weapons. A unit commander's signature							
is not required for O-7s and above.							
Take completed forms and weapon(s) to the Provost Marshal Office Desk Sergeant. FOR SAFETY REASONS, DO							
NOT BRING THE WEAPONS INTO THE MP STATION UNLESS YOU INFORM THE DESK SERGEANT PRIOR TO							
ARRIVAL AND YOU ARE GIVEN APPROVAL BY THE DESK SERGEANT.							
Signators of this form certify that they will comply with the Domestic Violence Amendment to the Gun Control							
Act of 1968, Army Regulations, local regulations and local/state laws on ownership, possession, registration,							
transportation and use of privately owned weapons and ammunition.							
13a. Typed or printed name of owner			13b. Signature of owner			13c. Date	
14a. Typed o	or printed name	/rank of unit commander	14b. Signature of unit commander			14c. Date	