

REQUEST FOR REGISTRATION OF PRIVATELY OWNED FIREARMS (REGISTRANT'S COPY)

See AR 190-14 and AR 190-11 for basic requirements, FR Reg 190-1 for local procedures

DATA REQUIRED BY THE PRIVACY ACT OF 1974**Authority:** 10 USC 3013, AR 190-11, Physical Security of Arms, Ammo and Explosives (AA&E), AR 190-14, Carrying of Firearms and Use of Force for Law Enforcement Security Duties, and EO 9397.**Principal Purpose:** To assist Commanders in carrying out effective law enforcement, troop safety and crime prevention programs.**Routine Uses:** Information is furnished to criminal justice elements outside the Department of Defense for investigation and prosecution when such cases fall within their jurisdiction or concurrent jurisdiction is applicable. The "Blanket Routine Use" set forth at the beginning of the Army's compilation of systems of records notices also apply to this system.**Disclosure:** Voluntary. However, failure to provide all necessary information will result in denial of registration.

1. Last Name, First, MI			2. DoD ID Number			3. Date of Birth		
4. Rank/Grade	5. Driver's License Number	6. State	7. Height	8. Weight	9. Eye Color	10. Hair Color		
11. Address, City, State, ZIP					12. Home Phone or Cell Number			
13. Unit (Company, Battalion, Brigade)				14. Unit Phone Number		15. ETS/Retirement Date		

Penalties for inaccurate or False Statements. The US Criminal Code (Title 18, Section 1001) provides that knowingly falsifying or concealing a material fact is a felony which may result in fines up to \$10,000 and/or 5 years imprisonment, or both.

16. Questions (Required explanation for all "YES" answers, use the remarks block 17.	YES	NO
a. Have you ever been convicted in any court of any felony offense?		
b. Have you ever been convicted in any court of a misdemeanor crime of domestic violence?		
c. Are you a fugitive from Justice?		
d. Have you ever been convicted in any court (includes non-judicial punishment under Article 15, UCMJ) for the possession, use or sale of marijuana, dangerous or narcotic drugs?		

17. Remarks

18. Firearms Information

Serial Number	Firearm Type	Model	Make/Brand	Caliber/Gauge

19. CERTIFICATION OF INFORMATION

I acknowledge my responsibility for security, proper storage and use of my privately-owned firearm(s). I am the owner of the firearm(s) listed below. I have received safety training on the use and storage of the below listed firearms. My statements on this form, and any attachments to it are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both. (See Section 1001 of Title 18, USC)

Registrant's Signature _____ Date _____

20. Commander/Registrar Review

The request for registration of the privately owned firearms(s) has been reviewed for accuracy and is being provided to the Directorate of Emergency Services for registration in the Army Law Enforcement Reporting and Tracking System (ALERTS). The privately owned firearm(s) will be stored in the following checked location: Unit Arms Room On Post Quarters Off Post, will transport firearm on post for authorized reasons

Commander's Signature _____ Commander Printed Name _____ Date _____

DES Representative Signature _____ DES Rep Printed Name _____ Date _____

REQUEST FOR REGISTRATION OF PRIVATELY OWNED FIREARMS (COMMANDER'S COPY)

See AR 190-14 and AR 190-11 for basic requirements, FR Reg 190-1 for local procedures

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DES Representative Signature _____ DES Rep Printed Name _____ Date _____

Instructions for completing FR Form 102-1, 13 March 2018

Registrants must complete blocks 1-19.

Block 1 – Input Last Name, First Name and MI (If no middle initial input NMI)

Block 2 – Input DoD ID Number. If Not Affiliated With the Military/Government Leave Blank.

Block 3 – Input Date of Birth

Block 4 – Input Rank and Grade (i.e. SSG/E-6)

Block 5 – Input Driver License Number (i.e. K03-22-1111)

Block 6 – Input Driver License State Abbreviation (i.e KS)

Block 7 – Input Height in Feet and Inches (i.e. 5' 7")

Block 8 – Input Weight in Pounds

Block 9 – Input Eye Color

Block 10 – Input Hair Color

Block 11 – Input Current Address, City, State, and Zip Code (If residing in the barracks include building number and room number)

Block 12 – Input Current Home or Cell Phone Number

Block 13 – Input Unit Information (Include Company/Troop, Battalion/Squadron/ and Brigade) (i.e A Co. 2-1 AVN, CAB)

Block 14 – Input Current Unit/Duty Phone Number (i.e. Orderly Room Number)

Block 15 – Input ETS/Retirement Date. If Indefinite Leave Blank.

Block 16 – Answer the Four Questions Either YES or NO

Block 17 – If You Answer YES to Any Question in Block 12, Explain Your Reason Here.

Block 18 -- Input Information of the Firearms You Are Requesting to Register. If Adding Multiple, Replace the N/A With the Information of the Additional Firearms.

Serial number

Fire Arm Type (i.e. Semi Auto Pistol, Bolt Action Rifle)

Model (i.e. XD-9)

Make/Brand (i.e. Springfield)

Caliber (i.e. 9mm)

Block 19 – Certify Your Answers by Signing and Dating. If Digitally Signing, Ensure You Sign Both Forms.

Block 20 Commander Review (***For Military Personnel and Dependents Only***) -- Commander's Must Select the Location They Are Authorizing the Firearms to be Stored (i.e Unit Arms Room, On Post Quarters, Off Post Quarters). If Digitally Signing, Commanders Must Ensure They Sign Both Forms. After Signing (Digitally or Manually), The Commander Will Retain Page 2 of 2 (Commander's Copy) For His/Her Records. This Record is Intended to Show All Firearms the Commander Has Approved For Registration in Their Command.

Block 20 – Registrar Review. DES Representative Will Review the Form, Input the Information Into ALERTS, and Sign to Complete the Registration Process. The Registrar Will Provide the Individual a Printed, Signed and Embossed ALERTS Registration Form. The Registrar Will Sign and Emboss a Copy of FR 102-1, Returning it to the Soldier With Instructions to Give The Form To Their Commander. The Commander Will Replace the Commander's Copy in Their Files with This Completed Form.

If Digitally Signing, the Registrar Must Ensure They Digitally Sign Both Forms.