

Power of Attorney

Power of Attorney

Québec Firearms Registration Service (SIAF)

By means of this form, the owner of a non-restricted firearm (the mandator) authorizes a third party (the person holding a general power of attorney) to represent the owner to enter or modify the information in his file maintained by the Québec Firearms Registration Service (SIAF).

By accepting this power of attorney, the person holding a general power of attorney is obliged to exercise it. The mandator remains responsible for the obligations stemming from the *Firearms Registration Act* and for ensuring that the person holding a general power of attorney properly fulfils his power of attorney.

The person holding a general power of attorney is obliged to carry out the power of attorney that he has accepted and must act in the overriding interest of the mandator by displaying caution, diligence, honesty, and loyalty.

Last name, first name Address City (PO box), province			
Γο the Québec Firearms Registration Service (SIAF)			
Dear Sir or Madam,			
Last name, first name Date of birth			
, the undersigned, Mr./Ms, born on	_ and	residing	at
, acting in my capacity as mandator,			
Address			
nereby grant power of attorney to			
Last name, first name Date of birth			
Mr./Ms, born on	and	residing	at
, acting in his or her capacity as a person holding attorney.	a gene	ral power	r of



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The person holding a general power of attorney can thus undertake with respect to the SIAF all the procedures necessary to act in my name. To this end, this person may access my file, sign for me and on my behalf all forms, deeds, and documents necessary to process such requests. This person may also request for me any missing document that such procedures require. ☐ I entrust to the person holding a general power of attorney all the powers devolved pursuant to the Firearms Registration Act. Otherwise, please specify which procedures the person holding a general power of attorney may carry out on behalf of the mandator: ☐ application to register a firearm; □ notice of transfer of ownership of a firearm; ☐ access to information on firearms contained in the mandator's applications and information pertaining to the mandator (telephone number, date of birth, main site where the firearms is kept, and so on); ☐ the modification of information provided to register a firearm (telephone number, main site where the firearm is kept, status, and so on); □ notice to the SIAF concerning the loss of the unique firearm number (UFAN) or the firearm registration number (FARN). Commencement date This power of attorney is valid starting from Drawn up and signed in ______, on _____, Date of signing Citv Signature: _____ Attach a copy of a valid ID of the new person authorized to speak on your behalf (the person holding a general power of attorney) and send the documents as indicated below. By regular mail: By secure email Québec Firearms Registration Service **By fax:** 418-646-0706 2535, boulevard Laurier Québec (Québec) G1V 5C6