SAMPLE LETTER 1

[Practice Address 1]

[Practice Address 2]

[Practice Address 3]

[Police Firearms Licensing Officer]

Date

Dear Sir,

FIREARMS LICENSING

Re: [PATIENT NAME – DOB]

Thank you for your request for medical information relating to the above named individual for the purposes of assessing them for suitability in issuing them with a firearms certificate.

I refuse to provide a report because I have a conscientious objection to the holding of firearms.

I am aware of my responsibilities and obligations under GMC guidance on conscientious objection.

Yours faithfully,