

Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) Staudt, Joseph A. Staudt's Gun Shop 7050 Allentown Blvd Harrisburg, PA 17112, DAUPHIN	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) <p style="text-align: center;">766085-2016-0048-B1B</p> 3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 4b. TARGET HOURS <p style="text-align: center;">823043014F04914</p> 5. REQUESTED BY (SIGNATURE, TITLE AND DATE)
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6. ATF OFFICER(S) ASSIGNED

(b)(6) - Assigned Investigator
 (b)(6) - Lead Investigator
 (b)(6) - Assigned Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

(b)(6) Area Supervisor, 10/01/2015

8. PURPOSE/SPECIAL INSTRUCTIONS

9. INSPECTION RESULTS		<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC	10. TRAVEL EXPENSES (OPTIONAL)	
NO. OF VIOLATIONS	3	NO. OF REFERRALS		2111 - PER DIEM
NO. OF TECS CHECKS		NO. OF TECS HITS		2112 - P.O.A.
NO. OF TAX ADJUSTMENTS		\$ VALUE OF TAX INCREASES		2113 - COMM. AIR
		\$ VALUE OF TAX DECREASES		2114 - RENTAL CAR
NO. OF ASSESSMENTS		\$ VALUE OF ASSESSMENTS		2115 - GPV EXPENSES
NO. OF CLAIMS		\$ VALUE OF CLAIMS		2116 - MISC.
NO. OF TAX PERIODS		\$ VALUE OF TAXES VERIFIED		TOTAL \$ FOR INSP.

11. ATF OFFICER'S RECOMMENDATION

Submitted by (b)(6) - Industry Operations Investigator

Submitted on: 07/13/2016

Viols WL ONLY and No Recall Inspection

12. TIME ACCOUNTING DATA		
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b)(6)	
MAR 2016	18.00	
ATF OFFICER'S SUBTOTAL	18.00	ATF OFFICER'S SIGNATURE
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b)(6)	
JAN 2016	8.00	
MAR 2016	43.00	
APR 2016	24.00	
JUN 2016	8.00	
ATF OFFICER'S SUBTOTAL	83.00	ATF OFFICER'S SIGNATURE
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b)(6)	
MAR 2016	23.00	
ATF OFFICER'S SUBTOTAL	23.00	ATF OFFICER'S SIGNATURE
TOTAL HOURS	124.00	

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	3. PERMIT/LICENSE NUMBER 823043014F04914	4a. TARGET DATE	4b. TARGET HOURS
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)		

13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION

Staudt, Joseph A.
Staudt's Gun Shop
7050 Allentown Blvd
Harrisburg, PA 17112 - Daupin County

RDS: 8-23-04914

Lead IOI: (b)(6)

Summary: On 4/8/2016 a DE compliance inspection was completed on the above. Three violations were cited resulting in a warning letter being sent on 7/14/2016. No recall inspection is required.

Request FLS be updated to reflect this inspection.
Recommend Renewal

Email sent to:

FEL Actions Philadelphia
(b)(6)
(b)(6)

Viols WL ONLY and No Recall Inspection

REVIEWED

CONCUR

SEE COMMENTS

FINAL DISPOSITION

SIGNATURE AND TITLE

(b)(6) - Area Supervisor

(b)(6)

Digitally signed by (b)(6)
DN: cn=(b)(6), o=ATF
email=(b)(6)
c=US
Date: 2016.07.14 15:53:47 -0400

REVIEW DATE

07/14/2016

ROUTING SEQUENCE AND DATE

- 1. _____
- 2. _____
- 3. _____
- 4. _____

CONTROL FILE POSTED DATE _____



U.S. Department of Justice

Bureau of Alcohol, Tobacco,
Firearms and Explosives

www.atf.gov

July 14, 2016

766085: (b)(6)
5373

Joseph A. Staudt
Staudt's Gun Shop
7050 Allentown Blvd
Harrisburg, PA 17112
FFL#: 8-23-043-01-4F-04914

Dear Joseph A. Staudt:

During a recent compliance inspection at your firearms business covering the period of March 22, 2015 through March 22, 2016, you were cited for violations of 27 Code of Federal Regulations, Part 478. A copy of the Report of Violations, Form 5030.5, issued at the time of the inspection is enclosed.

All violations were fully explained to you by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) inspector. You indicated that you understood the requirements of the firearms laws and regulations. You further indicated that corrective actions would be taken to eliminate future violations.

The records you are required to maintain and the business operations you conduct are important to law enforcement in our continuing effort to reduce violent crime and protect the public. It is essential that you comply with all Federal laws and regulations that govern your firearms business. This is critical to carrying out our mission to protect the public and ensure that criminals do not gain access to firearms. ATF appreciates the efforts you and other industry members make in this area, and we look forward to continuing to work with you in that regard.

Joseph A. Staudt
Staudt's Gun Shop

You are reminded that retention of your Federal firearms license is conditioned upon your compliance with Federal laws and regulations. Any future violations, either repeat or otherwise, could be viewed as willful and may result in the revocation of your license. Please ensure that future compliance is achieved.

Should you have any questions regarding this matter, please contact IOI (b)(6) at (b)(6).

Sincerely yours,

(b)(6)

Enclosure

c: National Licensing Center
Philadelphia Field Division

Report of Violations

Instructions

Please write firmly with a ball point pen when completing this form. ATF officers will prepare this form in triplicate. The original copy will be given to the proprietor or a responsible representative. The remaining copies will be submitted with the completed inspection report. Supervisors will detach one copy from the completed report for their files.

Name of Proprietor Staudt, Joseph A. Staudt's Gun Shop	Street Address 7050 Allentown Blvd	City Harrisburg	State PA	Zip Code 17112-	County DAUPHIN	Page 2 of 2 Pages
License/Permit/Registry Number (if any) 823043014FD4914	Expiration Date 6/1/2017	Date(s) or Period of Inspection 03/22/2016 through 04/08/2016				

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 3

Nature of Violation:

The licensee failed to ensure that Section B, Identification Information of the ATF Form 4473 was completed as required prior to the sale or transfer of a firearm to a non-licensee in instances: Item 20a was found to be incorrect or incomplete in

Date Corrections to be Made:
(If not corrected immediately)

Corrective Action to be Taken: Licensee was instructed to review all ATF F4473's to ensure all required information is accurate and complete after every transaction.
(If not corrected immediately)

Citation: 27 CFR 478.124(c)(3)(i)

I Have Received a Copy of This Report of Violations: (Proprietor's signature and title)	Date
Signature and Title of ATF Officer	Date

Report of Violations

Instructions

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Number: 3	Date Corrections to be Made: <i>(If not corrected immediately)</i>
Nature of Violation: The licensee failed to ensure that Section B, Identification Information of the ATF Form 4473 was completed as required prior to the sale or transfer of a firearm to a non-licensee in instances: Item 20a was found to be incorrect or incomplete in	Corrective Action to be Taken: Licensee was instructed to review all ATF F4473's to ensure all required information is accurate and complete after every transaction. <i>(If not corrected immediately)</i>
Citation: 27 CFR 478.124(e)(3)(i)	

I Have Received a Copy of This Report of Violations: <i>(Proprietor's signature and title)</i>	Date
Signature and Title of ATF Officer	Date

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: Mr. Joseph A. Staudt Staudt's Gun Shop 7050 Allentown Blvd Harrisburg, PA 17112	B. Received by (Printed Name) C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, February 2004	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
Domestic Return Receipt	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7008 1140 0003 9593 0291	102595-02-M-1540

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	
Certified Fee	
Return Receipt Fee <i>(Endorsement Required)</i>	
Restricted Delivery Fee <i>(Endorsement Required)</i>	
Total Postage & Fees \$	
Sent to: Joseph A. Staudt / Staudt's Gun Shop Street, Apt. No., or PO Box No. 7050 Allentown Blvd City, State ZIP+4 Harrisburg PA 17112	Postmark Here

7008 1140 0003 9593 0291