Assignment and Report

OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY)	2. U.I. NUMBER (ORG. SEG. CO 766085	DE, ASSIGNMENT N -2016-0171-B1B	O., P.P.C.)
			T =
Margel, John G.	3. PERMIT/LICENSE NUMBER	4a. TARGET DATE	4b. TARGET HOURS
High ∀elocity Firearms	823109017F04864		
8 North Market Street	5. REQUESTED BY (SIGNATURE	E, TITLE AND DATE)	
Selinsgrove,PA 17870, Snyder			
e ATE OFFICED(C) ACCIONED			

6. ATF OFFICER(S) ASSIGNED (b)(6) - Lead I - Lead Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

(b)(6)

Area Supervisor, 05/09/2016

8. PURPOSE/SPECIAL INSTRUCTIONS

DE5 - Please refer to domain assessment 2016 for instructions

9. INSPECTION RESULTS	CHE	CK IF NO VIOLATIONS, ADJUSTM	IENTS, ETC	10. TRAVEL EXPENSES	(OPTIONAL)
NO. OF VIOLATIONS	3	NO. OF REFERRALS		2111 - PER DIEM	
NO. OF TECS CHECKS	6	NO. OF TECS HITS		2112 - P.O.A.	
NO. OF TAX		\$ VALUE OF TAX INCREASES		2113 - COMM. AIR	
ADJUSTMENTS		\$ 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: 08/29/2016

Viols WL ONLY and Recall Inspection

		12. TIME ACCOUNTING DATA
ATF OFFICER'S NAME (MONTH, YEAR,	HOURS) (b	0)(6)
MAY 2016	2.00	
JUL 2016	29.50	
AUG 2016	37.00	
ATF OFFICER'S SUBTOTAL	68.50	ATF OFFICER'S SIGNATURE
TOTAL HOURS	68.50	

Assignment and Report

OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY)	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 766085-2016-0171-B1B
Margel, John G. High ∀elocity Firearms	3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 4b. TARGET HOURS 823109017F04864
8 North Market Street Selinsgrove,PA 17870, Snyder	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)
13. REVIEW AND	ROUTING

REVIEW COMMENTS AND RECOMMENDATION

Margel, John G. **High Velocity Firearms** 8 North Market Street Selinsgrove, PA 17870 - Snyder County

RDS: 8-23-04864

Lead IOI: (b)(6)

Summary: On 8/23/2016 a DE compliance inspection was completed on the above. Three violations were cited resulting in a warning letter being sent on 9/7/2016.

Recommend FLS be updated to reflect this inspection.

Recommend Renewal

Email sent to:

FEL Actions Philadelphia

(b)(6)

Viols WL ONLY and No Recall Inspection

□ REVIEWED	⊠ CONCUR	SEE COMMENTS	▼ FINAL DISPOSITION	
SIGNATURE AND TITLE (b)(6) - Area Supervisor	(h)	1(6)	REVIEW DATE 09/07/2016	
ROUTING SEQUENCE AND DATE				
□1. □2			1	
3.		CONTRO	FILE POSTED DATE	
■ 4				

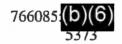


U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

www.atf.gov

September 7, 2016



John G. Margel High Velocity Firearms 8 North Market St Selinsgrove, PA 17870 FFL#: 8-23-109-01-7F-04864

Dear John G. Margel:

During a recent compliance inspection at your firearms business covering the period of July 26, 2015 through July 26, 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.

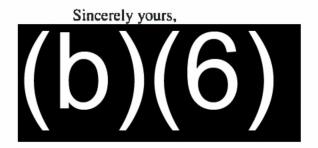
All violations were fully explained to you by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) inspector. You indicated that you understood the requirements of the firearms laws and regulations. You further indicated that corrective actions would be taken to eliminate future violations.

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.

John G. Margel High Velocity Firearms

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 10(b)(6)



Enclosure

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 Margel, John G. High Velocity Firearms	Street Address 8 North Market Street		City Selinsgrove		State PA	Zip Code 17870-	County Snyder	Page 1 of 2 Pages
License/Permit/Registry Number (If any) 823109017F04864		Expiration Date 6/1/2017		, ,		f Inspection th 08/23/2016		

Inspection Results

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

Number: 1

Nature of Violation:

Failure to enter into a record each receipt and every disposition of individual firearms instances.



nstance in which the licensee failed to log a firearm into the A&D Record.

stances in which the licensee failed to log firearms out of the A&D Record.

Citation: 27 CFR 478.125(e)

Number: 2

Nature of Violation:

Failure to prepare and submit a report of multiple sales or other disposition (ATF Form 3310.4) whenever the licensee sells or otherwise disposes of, two or more pistols, or revolvers, or any combination of pistols or revolvers totaling two or more to an unlicensed person at one time or during any five consecutive business days in instances involving firearms.

Citation: 27 CFR 478.126a

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

(If not corrected immediately)

Corrective Action to be Taken: Log in and out of the A&D Record the firearms not previously logged and make sure all firearms are logged into and out of the A&D in the proper time frames as called for in the regulations.

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Submit the multiple sales reports by either direct mail, fax, or email to account for the previous reports that were not submitted and make sure going forward that a multiple sale is completed for two (2) or more handguns sold in a five (5) business day period to the same non-licensee.

For Official Use Only

September 2019 Supplemental Production

Report of Violations

Revised April 2005

Please write firmly with a hall point pen when con representative. The remaining copies will be subm	npleting this form. ATF	officers will prepare th	ructions his form in triplication	ate. The origi	inal cop	y will be given t	o the proprietor or a r	esponsible	
Name of Proprietor Margel, John G. High Velocity Firearms	Street Address 8 North Market Street		City Sclinsgrove	s	State A	Zip Code 17870-	County Snyder		Page 2 of 2 Pages
License/Permit/Registry Number (If any) 823109017F04864		Expiration Date 6/1/2017	tion Results			of Inspection gh 08/23/2016			
An examination of your premises, records and ope	rations has disclosed th	e following violations	which have been	explained to	you:				
Nature of Violation: Failure to properly retain, in numerical order (by 4473 obtained in the course of transferring the cuThe licensee failed to print ou A&D/4473 system. Citation: 27 CFR 478.124(b)	ustody of firearms	nstances.	Corrective A	ected immedi	iately) Taken:	printed out and	TF Forms 4473 that v I printout/retain all AT as the perminent reco	FF Forms 447	
I Have Received a Copy of This Report of Violations	(Proprietor's signate	ure and title)						Date	
Signature and Title of ATF Officer								Date	_
For Official Use Only							V.	ATF E-	Form 5030.5

268

SENIORS CONCERNO WIS SENIOR	Control of the Contro	COMPLETE THIS SECTION ON DELIVERY
Complete Nems 1, 2, and 3, Also complete Item 4 if Restricted Defivery is desired. Print your name and address on the reverse.	Viso complete s desired. on the reverse	A Signature A Addressee
Attach this card to the back of the maliplace, or on the form it energy permits.	d to you. If the maliplece,	
		D. is delivery address different from Rom 17 CD. Yes. If YES, writer delivery address betow: CD. No.
	5 5 5	3. Service Types St Certified Mail
	2	D Registend Of Return Receipt for Merchandise O Insured Mail O CO D.
200		4. Restricted Delivery? (Extra Fee) C Yes
2. Article Municer (Trunsfor from service habs	900 7008	7008 1240 0003 9593 0307
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