

## Assignment and Report

<b>1. OPERATING NAME AND ADDRESS</b> (INCLUDE ZIP CODE AND COUNTY)  Olin Corporation 33 CR 166 Oxford, MS 38655, Lafayette	<b>2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.)</b> <div style="text-align: center;">777070-2016-0281-B1B</div>			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><b>3. PERMIT/LICENSE NUMBER</b> 164071078D03061</td> <td style="width: 33%;"><b>4a. TARGET DATE</b> 9/30/2016</td> <td style="width: 33%;"><b>4b. TARGET HOURS</b></td> </tr> </table>	<b>3. PERMIT/LICENSE NUMBER</b> 164071078D03061	<b>4a. TARGET DATE</b> 9/30/2016	<b>4b. TARGET HOURS</b>
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	<b>5. REQUESTED BY (SIGNATURE, TITLE AND DATE)</b>			

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

**7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)**  
 (b) (6), Area Supervisor, 04/05/2016

**8. PURPOSE/SPECIAL INSTRUCTIONS**

<b>9. INSPECTION RESULTS</b>			<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC	<b>10. TRAVEL EXPENSES (OPTIONAL)</b>	
NO. OF VIOLATIONS	2	NO. OF REFERRALS		2111 - PER DIEM	
NO. OF TECS CHECKS	16	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: 12/13/2016  
  
 Viols WC with WL and Recall

12. TIME ACCOUNTING DATA		
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b) (6)	
AUG 2016	45.00	
SEP 2016	6.00	
ATF OFFICER'S SUBTOTAL	51.00	ATF OFFICER'S SIGNATURE
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b) (6)	
AUG 2016	80.00	
SEP 2016	43.00	
ATF OFFICER'S SUBTOTAL	123.00	ATF OFFICER'S SIGNATURE
TOTAL HOURS	174.00	

**13. REVIEW AND ROUTING**

REVIEW COMMENTS AND RECOMMENDATION  
 Viols WL ONLY and No Recall Inspection

<input checked="" type="checkbox"/> REVIEWED <input type="checkbox"/> CONCUR <input checked="" type="checkbox"/> SEE COMMENTS <input type="checkbox"/> FINAL DISPOSITION	
SIGNATURE AND TITLE (b) (6) - Area Supervisor	REVIEW DATE 12/09/2016

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	3. PERMIT/LICENSE NUMBER 164071078D03061	4a. TARGET DATE 9/30/2016	4b. TARGET HOURS
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)		

### 13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION

SEE PII DATED 12/13/16 MDWREN

Viols WL ONLY and No Recall Inspection

REVIEWED       CONCUR       SEE COMMENTS       FINAL DISPOSITION

SIGNATURE AND TITLE MDWREN - DIO	REVIEW DATE 12/13/2016
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ROUTING SEQUENCE AND DATE

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

CONTROL FILE POSTED DATE \_\_\_\_\_

# 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 Olin Corporation	Street Address 33 CR 166	City Oxford	State MS	Zip Code 38655-	County Lafayette	Page 1 of 2 Pages
License/Permit/Registry Number <i>(If any)</i> 164071078D03061	Expiration Date 4/1/2018	Date(s) or Period of Inspection 08/09/2016 through 09/14/2016				

### 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:**

The Licensee failed to accurately maintain the Acquisition and Disposition Record per ATF Regulations.

- (b)(3) - Public Law 112-55 (125 Stat. 55) Instances, the Licensee failed to record the Acquisition of a firearm.
- (b)(3) - Public Law 112-55 Instances, there were Double Entries of Firearms in the A&D Record.

**Date Corrections to be Made:**

*(If not corrected immediately)*

**Corrective Action to be Taken:**

*(If not corrected immediately)*

Investigator (b)(6) instructed and verified the Licensee to reconciling his A& D Records and instructed the Licensee that he has Seven (7) business days to log firearms in or out of his A&D Record if he keeps a commercial receipt.

**Citation:** 27 CFR 478.123(a)

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License/Permit/Registry Number <i>(If any)</i> 164071078D03061	Expiration Date 4/1/2018	Date(s) or Period of Inspection 08/09/2016 through 09/14/2016				

### Inspection Results

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

**Number:** 2

**Nature of Violation:**

The Licensee failed to accurately maintain the Acquisition and Disposition Record per ATF Regulations.

(b) (1) - Public Law 112-56 (11/25/10) Stat. 50

Instances, the Licensee failed to record the Disposition of a Firearm.

**Date Corrections to be Made:**

*(If not corrected immediately)*

**Corrective Action to be Taken:**

*(If not corrected immediately)*

Investigator (b) (6) instructed and verified the Licensee to reconciling his A&D Records and instructed the Licensee that he has Seven (7) business days to log firearms out of his A&D Record if he keeps a commercial receipt.

**Citation:** 27 CFR 478.123(d)

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



**U.S. Department of Justice**

Bureau of Alcohol, Tobacco,  
Firearms and Explosives  
100 W. Capitol, Suite 1403  
Jackson, MS 39269

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www.atf.gov

December 13, 2016

777070: (b) (6)  
5373

**WARNING LETTER**

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

Olin Corporation  
Mr. Jeffrey Alan Longnecker  
33 County Road 166  
Oxford, MS 38655

Dear Mr. Longnecker:

During a recent compliance inspection at your firearms business covering the period of August 9, 2015 through August 9, 2016, you were cited for violations of 27 Code of Federal Regulations, Part 478. The violations were discussed with you during the inspection. A copy of the Report of Violations, Form 5030.5, issued at the time of the inspection is enclosed.

All of the violations were fully explained to you by the Bureau of Alcohol Tobacco Firearms and Explosives (ATF) Investigator. You indicated that you understood the requirements of the firearms laws and regulations. You further indicated 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.

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, will be considered as willful and may result in the revocation of your license.

Please ensure that future compliance is achieved. Should you have any further questions regarding this matter, please contact (b) (6) at (b) (6)

Sincerely Yours,

(b) (6)

Area Supervisor

Enclosure

Cc: National Licensing Center  
Jackson II Field Office