**U.S. Department of Justice**
Bureau of Alcohol, Tobacco, Firearms and Explosives

# Assignment and Report

| 1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) | 2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) | | |
|---|---|---|---|
| SHILEN RIFLES INC<br>none used<br>205 METRO PARK BLVD<br>ENNIS,TX 75119, ELLIS | 781025-2017-0029-B1B | | |
| | 3. PERMIT/LICENSE NUMBER<br>575139079F08900 | 4a. TARGET DATE | 4b. TARGET HOURS |
| | 5. REQUESTED BY (SIGNATURE, TITLE AND DATE) | | |

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

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)
(b)(6), Acting Area Supervisor, 12/27/2016

8. PURPOSE/SPECIAL INSTRUCTIONS
Conduct a firearms disposition emphasis inspection. Ensure the licensee meets local zoning and ATF regulations.

| 9. INSPECTION RESULTS | | ☐ CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC | | 10. TRAVEL EXPENSES (OPTIONAL) | |
|---|---|---|---|---|---|
| NO. OF VIOLATIONS | 7 | NO. OF REFERRALS | | 2111 - PER DIEM | |
| NO. OF TECS CHECKS | 2 | 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: 05/18/2017

Viols WL ONLY and Recall Inspection

**12. TIME ACCOUNTING DATA**

| ATF OFFICER'S NAME (MONTH, YEAR, HOURS) (b)(6) | | |
|---|---|---|
| OCT 2016 | 2.00 | |
| ATF OFFICER'S SUBTOTAL | 2.00 | ATF OFFICER'S SIGNATURE |
| ATF OFFICER'S NAME (MONTH, YEAR, HOURS) (b)(6) | | |
| FEB 2017 | 56.00 | |
| ATF OFFICER'S SUBTOTAL | 56.00 | ATF OFFICER'S SIGNATURE |
| TOTAL HOURS | 58.00 | |

**13. REVIEW AND ROUTING**

REVIEW COMMENTS AND RECOMMENDATION
Viols WL ONLY and Recall Inspection

☒ REVIEWED ☒ CONCUR ☐ SEE COMMENTS ☒ FINAL DISPOSITION

| SIGNATURE AND TITLE | REVIEW DATE |
|---|---|
| (b)(6) - Director, Industry Operations | 03/09/2017 |

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| | 3. PERMIT/LICENSE NUMBER<br>575139079F08900 | 4a. TARGET DATE | 4b. TARGET HOURS |
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ROUTING SEQUENCE AND DATE

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

CONTROL FILE POSTED DATE _____

**U.S. Department of Justice**
Bureau of Alcohol, Tobacco, Firearms and Explosives

# 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 | Street Address | City | State | Zip Code | County | Page 1 of 4 Pages |
|---|---|---|---|---|---|---|
| SHILEN RIFLES INC | 205 METRO PARK BLVD | ENNIS | TX | 75119- | ELLIS | |

| License/Permit/Registry Number *(If any)* | Expiration Date | Date(s) or Period of Inspection |
|---|---|---|
| 575139079F08900 | 6/1/2019 | 02/08/2016 through 02/07/2017 |

**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 furnish all information called for in each ATF Form 4473 as indicated by the headings on the ATF Form 4473 and the instructions on or pertaining to the ATF Form 4473. [redacted] forms)

On ATF Form 4473 (2012 Edition) Item # 24, 25 was blank on [redacted] form, Item # 32 was blank on [redacted] form and Item # 33 and 35 was blank on [redacted] form.

**Citation:** 27 CFR 478.21(a)

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will ensure that all ATF Forms 4473 are properly completed.

**Number:** 2

**Nature of Violation:**

Failure to conduct the required NICS background check and have the NICS system inform the licensee that it has no information that receipt of the firearm by the transferee would be in violation of Federal or State Law prior to the completion of the firearm transfer. ([redacted] form)

(b)(3) - 112 Public Law 55 125 Stat 552, (b)(6)

**Citation:** 27 CFR 478.102(a)

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will properly conduct the required NICS background checks prior to the completion of the firearm(s) transfer for all out of state residents.

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Bureau of Alcohol, Tobacco, Firearms and Explosives

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| Name of Proprietor | Street Address | City | State | Zip Code | County | Page 2 of 4 Pages |
|---|---|---|---|---|---|---|
| SHILEN RIFLES INC | 205 METRO PARK BLVD | ENNIS | TX | 75119- | ELLIS | |

| License/Permit/Registry Number *(If any)* | Expiration Date | Date(s) or Period of Inspection |
|---|---|---|
| 575139079F08900 | 6/1/2019 | 02/08/2016 through 02/07/2017 |

**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:**

Failure to obtain a properly completed ATF Form 4473 from a nonlicensee prior to the transfer of a firearm. (b)(3) forms)

On ATF Form 4473 (2012 Edition) Item #1 was an error on (b)(3) form; Item # 2 was an error on (b)(3) form and Item # 17 was blank on (b)(3) forms and an error on (b)(3) forms.

**Citation:** 27 CFR 478.124(c)(1)

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will ensure that a nonlicensee, prior to the transfer of a firearm, completes all the required information on the ATF Form 4473.

**Number:** 4

**Nature of Violation:**

Failure to verify and correctly record identification document of transferee on ATF Form 4473. (b)(3) form)

(b)(3) 112 Public Law 55 125 STAT 552

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

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will always verify and correctly recorded all identification documents on the ATF Form 4473.

**U.S. Department of Justice**
Bureau of Alcohol, Tobacco, Firearms and Explosives

# Report of Violations

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| Name of Proprietor | Street Address | City | State | Zip Code | County | Page 3 of 4 Pages |
|---|---|---|---|---|---|---|
| SHILEN RIFLES INC | 205 METRO PARK BLVD | ENNIS | TX | 75119- | ELLIS | |

| License/Permit/Registry Number *(If any)* | Expiration Date | Date(s) or Period of Inspection |
|---|---|---|
| 575139079F08900 | 6/1/2019 | 02/08/2016 through 02/07/2017 |

**Inspection Results**

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

**Number:** 5

**Nature of Violation:**

Failure to completely and properly identify the firearm transferred on the ATF Form 4473. ([redacted] form)

(b)(3) 112 Public Law 55 125 STAT 552

**Citation:** 27 CFR 478.124(c)(4)

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will completely and properly identify the firearm transferred on the ATF Form 4473.

**Number:** 6

**Nature of Violation:**

Failure to properly record the firearm transfer completion date upon transfer of a firearm to a nonlicensee on the ATF Form 4473. [redacted] form)

(b)(3) 112 Public Law 55 125 STAT 552

**Citation:** 27 CFR 478.124(c)(5)

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

**Corrective Action to be Taken:** *(If not corrected immediately)* The licensee will ensure to properly record the firearm transfer completion date on the ATF Form 4473 when the firearm is transferred to the transferee.

**U.S. Department of Justice**
Bureau of Alcohol, Tobacco, Firearms and Explosives

# Report of Violations

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| Name of Proprietor | Street Address | City | State | Zip Code | County | Page 4 of 4 Pages |
|---|---|---|---|---|---|---|
| SHILEN RIFLES INC | 205 METRO PARK BLVD | ENNIS | TX | 75119- | ELLIS | |

| License/Permit/Registry Number *(If any)* | Expiration Date | Date(s) or Period of Inspection |
|---|---|---|
| 575139079F08900 | 6/1/2019 | 02/08/2016 through 02/07/2017 |

**Inspection Results**

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

**Number:** 7

**Nature of Violation:**

Failure to accurately and timely maintain the Acquisition and Disposition Record. (b)(3) instances)

Licensee failed to log into inventory (b)(3) 11 receivers (b)(3) 112 Public Law 55 125 STAT 552 (b)(3) 112 Public Law 55 125 STAT 552 (b)(6)

Licensee failed to record the disposition in (b)(3) 11 instances (b)(3) 112 Public Law 55 125 STAT 552 (b)(3) 112 Public Law 55 125 STAT 552

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

**Corrective Action to be Taken:** The licensee will accurately and timely maintain the Acquisition and Disposition Record.
*(If not corrected immediately)*

**Citation:** 27 CFR 478.125(e)

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

**U.S. Department of Justice**

Bureau of Alcohol, Tobacco,
Firearms and Explosives

*March 23, 2017*

www.atf.gov

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SHILEN RIFLES INC
205 METRO PARK BLVD
ENNIS, TX 75119-
RE: 575139079F08900

Dear Mrs. Jennifer Hull:

During a recent inspection at your firearms business covering the period February 8, 2016 to February 7, 2017 you were cited for violations of Title 27, Code of Federal Regulations, Part 478. A copy of the Report of Violations, ATF F 5030.5, issued at the time of the inspection is enclosed.

All violations were fully explained to you or your designated responsible person by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) Industry Operations Investigator(s). You or your responsible person indicated that you understood the requirements of the firearms laws and regulations and 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 efforts 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 to ensure that criminals do not gain access to firearms. ATF appreciates the efforts you and other industry members make in this area. 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, 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 (b)(6), Industry Operations Investigator at (b)(6).

Sincerely yours,

(b)(6)

Area Supervisor for Dallas Group V

Enclosure

cc: Federal Firearms Licensing Center
Dallas V (IO) Field Office