Assignment and Report

1. OPERATING NAME AND ADDRESS
(INCLUDE ZIP CODE AND COUNTY)

HIGH BRIDGE ARMS, INC
3185 MISSION STREET
SAN FRANCISCO,CA 94110, SAN FRANCISCO

2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.)
786060-2015-0118-B1B
3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 994075085A00148 9/15/2015
5. REQUESTED BY (SIGNATURE, TITLE AND DATE)

6. ATF OFFICER(S) ASSIGNED

(b) (6) Lead Inve

Lead Investigator - Assigned Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

(b) (6)

Area Supervisor, 12/09/2014

8. PURPOSE/SPECIAL INSTRUCTIONS

9. INSPECTION RESULTS	CHE	CK IF NO VIOLATIONS, ADJUSTM	10. TRAVEL EXPENSES	(OPTIONAL)	
NO. OF VIOLATIONS	10	NO. OF REFERRALS	(b)(3)- Public Law 112-55 (125 Stat : 552)	2111 - PER DIEM	
NO. OF TECS CHECKS	2	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 b (b) (6) Industry Operations Investigator

Submitted on: 07/28/2015

Recommend Revocation / Denial of Renewal Application based upon the following multiple repeat violations, for which the licensee has previously received a Warning Letter:

- •27 CFR 478.125(e) Failure to properly maintain Acquisition & Disposition Records
- oAdditionally, this inspection resulted in the filing of ATF Theft / Loss report F20150000740 for a total of 71 firearms (representing 22% of the FFLs inventory).
- •27 CFR 478.126a Failure to report the multiple sales or other disposition of pistols and revolvers.
- •27 CFR 478.124(c)(5) Failure to sign and date or correctly date the Firearms Transaction Record (ATF Form 4473 Section D) at the time when the documented firearm was transferred.
- •27 CFR 478.124(c)(3)(iv) Failure to obtain / document information regarding requirements of section 478.102 (sales or deliveries of firearms) and record on the form the date on which the licensee contacted DROS, as well as any responses provided by the system, including any identification number provided by the system.
- •27 CFR 124(c)(3)(i) Failure to record on the ATF Form 4473 the type, ID number and expiration date of the identification document used to verify the identity of the transferee and alternate documentation showing current resident address.
- •27 CFR 478.124(c)(1) Failure to obtain information (or accurate information) required on ATF Form 4473 (Section A).
- •27 CFR 478.21(a) Failure to complete ATF Forms 4473 in accordance with instructions found on the form. Further, the licensee committed the following violation:
- •27 CFR 478.128(c): Licensee knowingly committed a false statement on the Acquisition and Disposition Record Book, information required by the Act; resulting in a straw purchase.

Viols and Revocation / Denial of Renewal App

		1	2. TIME ACC	DUNTING DATA			
ATF OFFICER'S NAME (MONTH, YEAR	HOURS) (b)	6)				
DEC	2014	2.00					
JAN	2015	2.00					
MAR	2015	101.00					
APR	2015	85.00					
JUN	2015	97.00					
JUL	2015	63.00					
SEP	2015	20.00					
ATF EF 5700.14 (10-98) F	or Official Use C	Only		221		RIP	Page 1 of 2

Bureau of Alcohol, Tobacco, Firearms and Explosives

Assignment and Report

1. OPERATING NAME AND ADDRESS			2 III NUMBER	(ORG SEG CO	DDE, ASSIGNMENT NO., P.P.C.)				
(INCLUDE ZIP CODE AND COUNTY)			786060-2015-0118-B1B						
			2 DEDMIT/LICEN						
HIGH BRIDGE ARMS, INC			1		1	UKS			
3185 MISSION STREET	ED ANIOIOO	^	994075085A00148 9/15/2015						
SAN FRANCISCO, CA 94110, SAN	FRANCISC	O	5. REQUESTED	BY (SIGNATUR	E, TITLE AND DATE)				
		12. TIME ACCOU	INTING DATA						
ATF OFFICER'S NAME (MONTH, YEAR, H	iours) (b) (6)							
FEB 2016	9.00								
ATF OFFICER'S SUBTOTAL	379.00								
ATE OFFICERIO NAME (MONTH VEAR I	IOLIDO) 7	0/ (6/							
ATF OFFICER'S NAME (MONTH, YEAR, F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	o) (6)							
MAR 2015	18.00								
ATF OFFICER'S SUBTOTAL	18.00	ATF OFFICER'S SI	GNATURE						
TOTAL HOURS	397.00								
		13. REVIEW AN	ID ROUTING						
REVIEW COMMENTS AND RECOMMENDA	ATION								
of the dispositions. The responsible	person stated ast inspection ations.	d that they retain no	accountability or ove	ersight over the	s missing without any form of accountabil daily retail operations of the business, th erences in 2006 and 2007 under former	ity iis			
⋉ REVIEWED	⊠ con	ICUR S	EE COMMENTS	⊘ FINΔI	DISPOSITION				
SIGNATURE AND TITLE	<u> </u>	COIL SI		REVIEW					
(b) (6) NSPECT Program M	1anager			REVIEW	07/20/2015				
REVIEW COMMENTS AND RECOMMENDA	ATION								
Due to the numerous, repeated seri- Firearms License.	ous violations	s of the Gun Control	Act, DIO Root concu	ırs with the reco	mmendation to revoke the Federal				
Viols and Revocation / Denial of Re	newal App								
X REVIEWED	X CON	ICUR 💢 SE	EE COMMENTS	FINAL	DISPOSITION				
SIGNATURE AND TITLE				REVIEW					
RMROOT - Director, Industry Opera	tions				07/21/2015				
ROUTING SEQUENCE AND DATE									
<u> </u>									
□ 2 CONTRO					ED DATE				
<u>3</u>									
4									

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 HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRI	EET	City SAN FRANCIS	СО	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 1 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date		` ´		f Inspection h 07/07/2015		

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 complete ATF Forms 4473 in accordance with instructions found on the form.

casions, the licensee failed to obtain / record information or accepted incorrect information required on the ATF Form 4473.



Citation: 27 CFR 478.21(a)

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

(If not corrected immediately)

Corrective Action to be Taken: Where possible, amend identified forms in accordance with instructions on the back of the ATF Form 4473.

> Ensure that all Firearms Transaction Records (ATF Form 4473) are completed, in their entirety with all information required by ATF regulation in conjunction with the instructions on the form, before completing the transfer of a firearm to a non-licensee.

Bureau of Alcohol, Tobacco, Firearms and Explosives

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Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRI	ЕЕТ	City SAN FRANCIS	CO	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 2 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date				f Inspection h 07/07/2015		

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:

Failure to obtain information (or accurate information) required on ATF Form 4473 (Section A).

casions, the licensee failed to obtain correct, complete, and accurate information g one or more of the following: the certification by the transferee that the transferee is not prohibited by the Act from possessing a firearm by checking or marking, "yes" to one of the prohibited factors; the transferee's State of residence; the transferee's INS-issued alien number or admission number, and certification by the transferee that the answers to Section A are true, correct, and complete.

(3)- Public Law 112-55 (125 Stat. 552)

Citation: 27 CFR 478.124(c)(1)

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

(If not corrected immediately)

Corrective Action to be Taken: Where possible, amend identified forms in accordance with instructions on the back of the ATF Form 4473.

> Ensure that all Firearms Transaction Records (ATF Form 4473) are completed, in their entirety with all information required by ATF regulation in conjunction with the instructions on the form, before completing the transfer of a firearm to a non-licensee.

Bureau of Alcohol, Tobacco, Firearms and Explosives

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Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRI	EET	City SAN FRANCIS	СО	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 3 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date		` ´		f Inspection h 07/07/2015		

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 identify the firearm to be transferred by listing on the Form 4473 the name of the manufacturer or importer, the type, model, caliber or gauge and serial number of the firearm.

easion, the licensee failed to record serial number of the firearm transferred on the Firearms Transaction Record (ATF Form 4473 - Section D) at the time when the documented firearm was transferred (b)(3)- Public Law 112-55 (125 Stat. 552

Citation: 27 CFR 478.124(c)(4)

Number: 6

Nature of Violation:

Failure to sign and date or correctly date the Firearms Transaction Record (ATF Form 4473 -Section D) at the time when the documented firearm was transferred.

asion, the licensee failed to have the buyer sign and date or correctly date the Firearms Transaction Record (ATF Form 4473 - Section D) at the time when the documented firearm was transferred

(3)- Public Law 112-55 (125 Stat. 552)

Citation: 27 CFR 478.124(c)(5)

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

(If not corrected immediately)

Corrective Action to be Taken: Amend identified form to reflect accurate information in accordance with instructions on the back of the ATF Form 4473

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

(If not corrected immediately)

Corrective Action to be Taken: Immediately & from this date forward amend identified forms in accordance with instructions on the back of the ATF Form 4473. Ensure that all Firearms Transaction Records are completed, in their entirety with all information required by ATF regulation in conjunction with the transfer of a firearm to a non-licensee.

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

Instructions

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Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRI	EET	City SAN FRANCIS	CO	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 4 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date		` ´		f Inspection h 07/07/2015		

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 report the multiple sales or other disposition of pistols and revolvers.

One of the disposition of pistols and revolvers.

One of the disposition of pistols and revolvers.

One of the disposition of pistols and revolvers. multiple sale or other disposition pistols and revolvers.

(3)- Public Law 112-55 (125 Stat. 552)

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: The licensee shall prepare a report of multiple sales or other disposition whenever it sells or otherwise disposes of, at one time or during any five consecutive business days, two or more pistols, or revolvers, or any combination of pistols and revolvers totaling two or more, to an unlicensed person (a report need not be made where pistols or revolvers are returned to the same person from whom they were received). The report shall be prepared on ATF Form 3310.4 and submitted no later than the close of business on the day that multiple sale or other disposition occurs.

Citation: 27 CFR 478.126a

Number: 8

Nature of Violation:

The licensee knowingly allowed a false statement on the ATF Form 4473 which is information required by the Act. IO as attached copies of the ATF Form 4473s, CA DOJ DROS responses, copies of both ID's, criminal history and invoices. IOI submitted this referral to the local ATF office for further inquiry

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

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

(If not corrected immediately)

Corrective Action to be Taken: The licensee shall not transfer any firearm when they are aware that the sale of that firearm has resulted in a false

statement on the ATF Form 4473.

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

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Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRI	ЕЕТ	City SAN FRANCIS	CO	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 5 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date				f Inspection h 07/07/2015		

Inspection Results

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

Citation: 27 CFR 478.128(c)

Number: 9

Nature of Violation:

Failure to accurately maintain required Acquisition record as prescribed (country of manufacture) in Table 1.

Citation: 27 CFR 478.122(a)

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Immediately & from this date forward the licensee shall ensure that all acquisitions of firearms are recorded with the required information in compliance with ATF regulations, not later than 15 days following the date of importation or other acquisition.

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

Instructions

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Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRE	EET	City SAN FRANCIS		State CA	Zip Code 94110-	County SAN FRANCISCO	Page 6 of 8 Pages
License/Permit/Registry Number (If any) 994075085A00148		Expiration Date		` ´		f Inspection h 07/07/2015		

Inspection Results

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

Number: 10

Nature of Violation:

Failure to accurately maintain required Acquisition & Disposition Record of sales or other dispositions to nonlicensees as prescribed in section 478.125.

A)Licensee failed, in stances, to properly document the transfer (disposition) of firearms in its required Acquisition & Disposition (A & D) records as follows:

Disposition information NOT recorded at time of ATF Inspection

- •Disposition Reconciled or Duplicate Entry nstances
- •Disposition information NOT recorded at time of ATF Inspection (Disposition NOT

Reconciled) - Missing stances

•Licensee incorrectly D d of a firearm while still in invent **Date Corrections to be Made:** (If not corrected immediately)

(If not corrected immediately)

07/07/2015

Corrective Action to be Taken: Immediately & from this date forward the licensee shall ensure that all sales or other dispositions of firearms are recorded in the required records, in compliance with ATF regulations, not later than 7 days following the date of such transactions.

> Immediately research, verify, update and/or record any / all required information regarding missing, inaccurate, duplicate and contradictory entries contained within the current Acquisition & Disposition (A&D) records. File ATF Theft/Loss Report on ATF Form 3310.11 accounting for all missing firearm Contact local law enforcement and report loss of inventory of firearm Further, contact ATF tracing center with any future updated information regarding missing firearm

Citation: 27 CFR 478.122(d)

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

Instructions

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Name of Proprietor	Street Address 3185 MISSION STREET	City	State	Zip Code	County	Page 7 of
HIGH BRIDGE ARMS, INC		SAN FRANCISCO	CA	94110-	SAN FRANCISCO	8 Pages
License/Permit/Registry Number (If any) 994075085A00148	Expiration Date		e(s) or Period of 04/2015 through	•		

Inspection Results

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

Number: 11

Nature of Violation:

Failure to record on the ATF Form 4473 the alternate documentation showing current resident address.

ccasions, the licensee failed to record any information pertaining to an identification document for a transferee, in response to information required on ATF Form 4473 question

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

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

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

(If not corrected immediately)

Corrective Action to be Taken: Amend identified form to reflect accurate information in accordance with instructions on the back of the ATF Form 4473.

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

Please write firmly with a ball point pen when comrepresentative. The remaining copies will be submit		officers will prepare th						sponsible	
Name of Proprietor HIGH BRIDGE ARMS, INC	Street Address 3185 MISSION STRE	City SAN FRANCISO	CO	State CA	Zip Code 94110-	County SAN FRANCISCO	Page 8 of 8 Pages		
License/Permit/Registry Number (If any) 994075085A00148					of Inspection gh 07/07/2015				
An examination of your premises, records and oper	rations has disclosed the		ion Results which have been e	xplained	to vou:				
Nature of Violation: Failure to obtain / document information regarding deliveries of firearms) and record on the form the well as any responses provided by the system, incomparison that the system. Option of the form the well as any responses provided by the system, incomparison that the system. Option of the firearms of the firearms of the system. Option of the firearms of	date on which the lice cluding any identification by record the date on who of a firearm, in response state transaction number transfer of a firearm, in #21b.	nsee contacted NICS, a on number provided by hich the licensee se to information er, on which the n response to e, on which the licensee		cted imme	ediately) be Taken:	Ensure that all Fir 4473) are completed by ATF in a second to the second	e back of the ATF For rearms Transaction R ted, in their entirety of regulation in conjunc- te form, before comple	Records (ATF Form with all information	
(b)(3)- Public Law 11. Citation: 27 CFR 478.124(c)(3)(iv) I Have Received a Copy of This Report of Violations								Date	
Signature and Title of ATF Officer								Date	