U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Assignment and Report

OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY)			2. U.I. NUMBER (2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 787050-2017-0355-B1B				
FARMAN, BRUCE G 2563 NE WM E SUTTON ROAD			1	3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 4b. TARGET HOURS 991035010D14146 5/19/2017				
BREMERTON,WA 98311, KITSAP				BY (SIGNATURE, TITLE AND DATE)	<u></u>			
6. ATF OFFICER(S) ASSIGNE (b)(6) - Lead	ED d Investiga	ator						
7. ASSIGNED BY (SIGNATUR	RE, TITLE A	AND DATE)						
(b)(6) , Are	ea Superv	risor, 04/11/2017						
8. PURPOSE/SPECIAL INST	RUCTIONS							
9. INSPECTION RESULTS	CHE	CK IF NO VIOLATIONS, ADJUSTI	MENTS, ETC	10. TRAVEL EXPENSES (OF	PTIONAL)			
NO. OF VIOLATIONS	1	NO. OF REFERRALS		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.				
Submitted on: 04/24/20		nspection						
			OUNTING DATA					
ATF OFFICER'S NAME (MO								
ATF OFFICER'S SUBTOTAL 23.00 ATF OFFICER'S SIGNATURE								
TOTAL HOURS 23.00								
13. REVIEW AND ROUTING								
REVIEW COMMENTS AND F ROV issued; Warning		NDATION t. No Recall Inspection.						
Viols WL ONLY and f	No Recall Ir	nspection						
	VIEWED	CONCUR	SEE COMMENTS	FINAL DISPOSITION				
SIGNATURE AND TITLE (b)(6) - Area Su	pervisor			REVIEW DATE 05/02/2017	7			
ROUTING SEQUENCE AND	DATE							
			- - CONTRO	DL FILE POSTED DATE				
4			- -					

U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

Please write firmly with a ball point pen when con representative. The remaining copies will be subm	npleting this form. ATF itted with the complete	officers will prepare	tructions this form in triplication upervisors will det	ate. The original cach one copy fror	copy will be given in the completed ro	to the proprietor or a report for their files.	responsible
Name of Proprietor FARMAN, BRUCE G	Street Address 2563 NE WM E SUTTON ROAD		City BREMERTON	State WA	Zip Code 98311-	County KITSAP	Page 1 of 1 Pages
License/Permit/Registry Number (If any) 991035010D14146	Expiration Date 4/1/2020						
An examination of your premises, records and oper	rations has disclosed the			explained to you:			
An examination of your premises, records and operations has disclosed the following violations Number: 1 Nature of Violation: The licensee failed to properly enter into a record each receipt and disposition of firearms. Citation: 27 CFR 478.125(e)		(If not corre Corrective A	tions to be Made cted immediately, action to be Take cted immediately,	n: The licensee v	vill ensure to properly sposition of firearms.	enter into a record each	
I Have Received a Copy of This Report of Violations	(Proprietor's signati	ure and title)					Date
Signature and Title of ATF Officer							Date



U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives Seattle Field Division 915 2nd Ave, Room 790 Seattle, WA 98174-1009

www.atf.gov

April 30, 2017

787050<mark>(b)(6)</mark> 5373

Bruce G. Farman 2563 NE WM E Sutton Road Bremerton, WA 98311

FFL: 9-91-035-01-0D-14146

Dear Mr. Farman:

During a compliance inspection at your firearms business covering the period of April 2016 to April 2017, 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.

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 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.

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 me at (b)(6)



Enclosure

cc: National Licensing Center Seattle II (I/O) Field Office

5. Department of Justice			
read of Alcohol, Tobacco.	Firearcia	and	Explosives

Report of Violations

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Please write firmly with a ball point prepresentative. The remaining copies	en when completing this form. will be submitted with the comp	ATE officers will prepar	astructions re this form in triplic Supervisors will do	cate. The origin tach one copy	al copy will be give from the completed	n to the proprietor or a n report for their files.	esponsible	
Name of Proprietor FARMAN, BRUCE G	Street Address 2563 NE WM E S	Street Address 2563 NE WM E SUTTON ROAD		Sta W.A		County	Page of Pages	
License-Permit/Registry Number (If ans) 991035010D14146		Expiration Data 4/1/2020	12.033		ata(s) or Period of Inspection 4/13/2016 through 04/13/2017			
The state of the			ection Results					
An examination of your premises, reco	rds and operations has disclosed	the following violation	is which have been	explained to yo	ut			
Number: 1			Date Correc	tions to be Mi	ide:			
fature of Violation: The licensee failed to properly enter into a record each receipt and disposition of farearms.			Corrective A	(If not corrected immediately) Corrective Action to be Taken: The licensee will easure to properly enter into a record each (If not corrected immediately) receipt and disposition of finearms.				

Have Reprived a Copy of This Repart of Violations (Proprietor's signature and title)	Date 04-13-2017		
(b)(6)	Deta 4/13/2017		
or Official Use Only	ATF E-Form \$030.5		