# **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.) 778035-2017-0091-B1B
Capras Sporting Goods Inc 8565 Hwy 65 NE	3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 4b. TARGET HOURS 341003018A01773
Blaine,MN 55434, Anoka	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)
6. ATF OFFICER(S) ASSIGNED  (b)(6) - Lead Investigator	

- Assigned Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

, Area Supervisor, 10/06/2016

#### 8. PURPOSE/SPECIAL INSTRUCTIONS

D-4: Other High Risk Inspections

Conduct full FFL DE compliance inspection

FFL has high volume, no compliance history since 2005, and has been subject to demand letter for FY-16

Assess ownership: Licensed under individual name with "incorporated" trade name

9. INSPECTION RESULTS	CHE	10. TRAVEL EXPENSES (OPTIONAL)			
NO. OF VIOLATIONS	10	NO. OF REFERRALS	2	2111 - PER DIEM	
NO. OF TECS CHECKS	62	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: 04/03/2017 FFLC: Please correct the Licensee Name to Capra's Sporting Goods Inc. This company is registrered with the State of Minnesota as a corporation and is not a sole proprietor.

Viols WL ONLY and Recall Inspection

		12. TIME ACCOUNTING DATA
ATF OFFICER'S NAME (MONTH, YEA	R, HOURS)	o)(6)
DEC 2016	3.00	
JAN 2017	94.00	
FEB 2017	54.00	
MAR 2017	11.00	
APR 2017	8.00	
ATF OFFICER'S SUBTOTAL	170.00	ATF OFFICER'S SIGNATURE
ATF OFFICER'S NAME (MONTH, YEA	R, HOURS)	D)(6)
JAN 2017	33.00	
ATF OFFICER'S SUBTOTAL	33.00	ATF OFFICER'S SIGNATURE

Bureau of Alcohol, Tobacco, Firearms and Explosives

# **Assignment and Report**

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY)			2. U.I. NUMBER (		DE, ASSIGNMENT N D-2017-0091-B1B	IO., P.P.C.)				
Capras Sporting Goods Inc					4a. TARGET DATE	4b. TARGET HOURS				
8565 Hwy 65 NE Blaine,MN 55434, Anoka				341003018A01773						
,			0.11240201202	) (O) O) (O) (O) (O) (O) (O) (O) (O) (O)	c, 111cc / 1110 D/ 11c/					
		12. TIME ACC	OUNTING DATA							
ATF OFFICER'S NAME (MONTH, YEAR, HO	33.00	o)(6)								
ATF OFFICER'S SUBTOTAL	33.00	ATF OFFICER'S	S SIGNATURE							
ATF OFFICER'S NAME (MONTH, YEAR, HO	9.00	b)(6)								
ATF OFFICER'S SUBTOTAL	9.00	ATF OFFICER'S	S SIGNATURE							
ATF OFFICER'S NAME (MONTH, YEAR, HO	24.00	o)(6)								
ATF OFFICER'S SUBTOTAL	24.00	ATF OFFICER'S	S SIGNATURE							
ATF OFFICER'S NAME (MONTH, YEAR, HO	32.00	b)(6)								
ATF OFFICER'S SUBTOTAL	32.00	ATF OFFICER'S	S SIGNATURE							
TOTAL HOURS	301.00	•								
		13. REVIEW	AND ROUTING							
REVIEW COMMENTS AND RECOMMENDATE WL Sent 4/04/2017	TION									
Viols WL ONLY and Recall Inspection	l									
<b>X</b> REVIEWED	⊠ cor	ICUR 🔀	SEE COMMENTS		DISPOSITION					
SIGNATURE AND TITLE (b)(6) - Area Supervisor				REVIEW	DATE 04/13/201	7				
ROUTING SEQUENCE AND DATE										
1			_							
			— CONTRO	CONTROL FILE POSTED DATE						
☐ 3. ☐ 4.										

Bureau of Alcohol, Tobacco, Firearms and Explosives

# **Report of Violations**

 	u	·u	5.5	v	13	,

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 Capra, Dean Capras Sporting Goods, Inc.	Street Address 8565 Hwy 65 NE		City Blaine		State MN	Zip Code 55434-	County Anoka	Page 1 of 6 Pages
License/Permit/Registry Number (If any) 341003018A01773		*		Date(s) or Period of Inspection 01/09/2017 through 02/15/2017				

#### **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 properly maintain the ATF F4473 as prescribed prior to the transfer of the firearm to a non-licensee on forms where the following items were discrepant.

Item 10a - Ethnicity information was blank

Item 11a - the transferee answered "No" to being the actual buyer

Item 18 - Certification date either blank or incorrect

Items 24 & 25 Recerfication signature and date either blank or incorrect

Item 30a # of firearms either blank or incorrect

Item 33 - Transferor signature was blank

Item 35 - Transferor's title was blank

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

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken: Ensure to obtain a properly completed ATF F4473 prior to

(If not corrected immediately) the transer of the firearm.

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 Capra, Dean Capras Sporting Goods, Inc.	Street Address 8565 Hwy 65 NE		City Blaine		State MN	Zip Code 55434-	County Anoka	Page 2 of 6 Pages
License/Permit/Registry Number (If any) 341003018A01773		Expiration Date 1/1/2018		Date(s) or Period of Inspection 01/09/2017 through 02/15/2017				

#### **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 properly complete the ATF F4473 prior to the transfer on forms where the following items were discrepant.

Item 2 - Address either blank or incorrect

Item 3 - Place of birth either blank or incorrect

Item 10b - Race was blank

Item 11d - Fugitive from Justice blank

Item 11b – "Yes" to under indictment or information in any court for a felony...

Item 11e - ".. Unlawful user of, or addicted to...controlled substances" Blank

Item 11j - "...renounced your citizenship" - Blank

Item 11k - "...alien illegally in the United States" - Blank

Item 111 - "Alien admitted to the United States..." blank on ( forms)

Item 13 - State of Residence blank

Item 14 - Country of citizenship blank

Item 16- Transferee signature blank

Item 17 - Certification date blank or incorrect on forms)

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

# Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken: Ensure to obtain a properly completed ATF F4473 prior to

(If not corrected immediately) the transfer of the firearm.

Revised April 2005

986

Bureau of Alcohol, Tobacco, Firearms and Explosives

# **Report of Violations**

nst			

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 Capra, Dean Capras Sporting Goods, Inc.	Street Address 8565 Hwy 65 NE		City Blaine		State MN	Zip Code 55434-	County Anoka	Page 3 of 6 Pages
License/Permit/Registry Number (If any) 341003018A01773		*		Date(s) or Period of Inspection 01/09/2017 through 02/15/2017				

#### **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 either obtain the proper government issued identification or incorrect identification was identified on forms.

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

Number: 4

#### Nature of Violation:

Failure to obtain a properly completed ATF F4473 prior to the transfer of the firearm on forms where the licensee failed to either record the NICS background information or provided incorrect NICS background information. The following discrepant instances were noted. Item 21a - The date the licensee contacted NICS was either blank or incorrect

Item 21b - The NICS Transaction Number was blank. Additionally there were duplicate NTN's used on different forms - forms)

Item 21c - The NICS response was blank or incorrect

Item 21d - The NICS response after a "Delay" was either blank or incorrect.

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

**Date Corrections to be Made:** 

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Ensure to obtain proper identiifcation prior to the transfer of

the firearm.

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

(If not corrected immediately)

Corrective Action to be Taken: Ensure to obtain a properly completed ATF F4473 prior to the transfer of the firearm by accurately and thoroughly completing the NICS background information.

Bureau of Alcohol, Tobacco, Firearms and Explosives

# Report of Violations

Please write firmly with a ball point per						onsible
representative. The remaining copies wi	ll be submitted with the completed inspe	ection report. Supervisors will de	tach one copy from	the completed r	eport for their files.	
Committee Committee	Turre the pre-	170	1633	- C2-27-3	The second second	-1

Instructions

Name of Proprietor Capra, Dean Capras Sporting Goods, Inc.	Street Address 8565 Hwy 65 NE		City Blaine	State MN	Zip Code 55434-	County Anoka	Page 4 of 6 Pages
License/Permit/Registry Number (If any) 341003018A01773		Expiration Date 1/1/2018			of Inspection agh 02/15/2017		

#### **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 obtain a properly completed ATF F4473 prior to the transfer of the firearm or where the firearms information was incomplete (b)(3) 112 Public Law 55 125 STAT 552 (b)(6)

Item 26 Manufacturer/Importer- Blank

Item 27 Model - Blank

Item 28 Serial Number - Blank

Item 29 Type of Firearm - Blank

Item 30 Caliber or Gauge - Blank

Citation: 27 CFR 478.124(c)(4)

Number: 6

#### Nature of Violation:

Failure to obtain a properly completed ATF F4473 prior to the transfer of the firearm or forms where transferor signature and transfer date were blank

Citation: 27 CFR 478.124(c)(5)

**Date Corrections to be Made:** 

(If not corrected immediately)

Corrective Action to be Taken: Obtain a completed ATF F4473 by ensuring all of the

(If not corrected immediately)

firearms information is included.

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

(If not corrected immediately)

Corrective Action to be Taken: Obtain a properly completed ATF F4473 prior to the transfer of the firearm by ensuring you have signed and dated the

form.

Bureau of Alcohol, Tobacco, Firearms and Explosives

# Report of Violations

more handguns.

#### 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 County City State Zip Code Page 5 of Capra, Dean Blaine MN 55434-8565 Hwy 65 NE Anoka 6 Pages Capras Sporting Goods, Inc. **Expiration Date** Date(s) or Period of Inspection License/Permit/Registry Number (If any) 341003018A01773 1/1/2018 01/09/2017 through 02/15/2017 Inspection Results An examination of your premises, records and operations has disclosed the following violations which have been explained to you: Number: 7 **Date Corrections to be Made:** (If not corrected immediately) Nature of Violation: Corrective Action to be Taken: Obtain a properly completed ATF F4473 prior to the transfer Failure to allow the elapse of 3 business days from the date the licensee contacted NICS and of the firearm by ensuring the NICS waiting period (If not corrected immediately) NICS has not notified the licensee that the receipt of the firearm by the transferre would be in violation of the law. (b)(3) 112 Public Law 55 125 STAT 552 (b)(6) requirements of 3 business days are adhrered to. Citation: 27 CFR 478.102(a)(2)(ii) Number: 8 **Date Corrections to be Made:** (If not corrected immediately) Nature of Violation: Corrective Action to be Taken: Obtain a properly completed ATF F4473 prior to the transfer Failure to adhere to the NICS check time limitation where 30 days had elapsed. of the firearm by ensuring to adhere to the NICS background (If not corrected immediately) time limitations of 30 days. Citation: 27 CFR 478.102(c) Number: 9 **Date Corrections to be Made:** (If not corrected immediately) Nature of Violation: Corrective Action to be Taken: Complete and Submit the ATF F3310.4, Multiple Sale of Failure to complete and submit the ATE F3310.4, Multiple Sale or Other Disposition of Pistols and Revoylers in instances involving firearms (b)(3) 112 Public Law 55 125 STAT 552 (b)(6) Pistols and Revovlers when disposing the firearms at one (If not corrected immediately) and Revovlers in instances involving firearms time or during any five consecutive business days two or

Citation: 27 CFR 478.126(a)

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	npleting this form. ATF itted with the complete	officers will prepare the	ructions his form in triplications pervisors will det	ate. The or	riginal cop	by will be given to the completed report	the proprietor or a ret for their files.	responsible	
Name of Proprietor Capra, Dean Capras Sporting Goods, Inc.	Street Address 8565 Hwy 65 NE		•		State MN	Zip Code 55434-	County Anoka	1	ge 6 of Pages
License/Permit/Registry Number (If any) 341003018A01773				Date(s) or Period of Inspection 01/09/2017 through 02/15/2017					
			ion Results						
An examination of your premises, records and oper	rations has disclosed the	e following violations	which have been	explained	to you:				
Number: 10  Nature of Violation:  Failure to properly maintain the Acquisition and instances where the disposition failed to be resulting instances where of the acquisition information manufacturer/importer & serial number (gunsmit). The Federal Firearms License number failed to be The gunsmith record failed to have the proper disposition date and no importer information was	ecorded  port submitted ON 01/2  failed to be recorded to h record).  e recorded upon acquises sposition headings of N	31/17. o include the sition. fame, Address, and	Date Correc (If not corre Corrective A (If not corre	cted imme	ediately) oe Taken:	Ensure to properly Record as require 01/31/2017.	y maintain the Acqu d. Theft/Loss repor	uisition and Dis t submitted on	position
<b>Citation:</b> 27 CFR 478.125(e)									
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. Postal Service <sup>TM</sup> CERTIFIED MAIL® F Domestic Mail Only For delivery information, visit our we	ECEIPT
For delivery information, visit our we	L USE
Postage \$ 4.02  Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$ 4.02	Postmark Here
Sinest & Apt. No. 8565 Highwa City, State, 21944 Bland, MV S	10

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>Capra's Sporting Goods Inc.</li> <li>Q565 High way G5 NE</li> </ul>	A. Signators  X. Agent  Addresses  B. Heceived by (Printed Name)  C. Date of Delivery  C. Date of Delivery  If YES, enter delivery address below:
lune, AN 55434	3. Service Type  12 Certified Mail
	4. Restricted Delivery? (Extra Fee)
1000 0594 1000	0597 1386
r from a	TESAT (SAES)



Bureau of Alcohol, Tobacco, Firearms and Explosives

St. Paul II 10 Field Office

30 East 7 Street, Suite1900 St. Paul, MN 55101 www.ntf.gov

Capra's Sporting Goods Inc. 8565 Highway 65 NE Blaine, MN 55434 FFL# 3-41-003-01-8A-01773

Dear Mr. Capra:

During a recent compliance inspection at your firearms business from January 9, 2017 through February 15, 2017 you were cited for violations of 27 Code of Federal Regulations, Part 478. A copy of the Report of Violations, Form 5030.5, has been forwarded to you via certified mail and is enclosed with this notice.

All violations were fully explained to you by the Bureau of Alcohol, Tobacco, Firearms and Explosives Investigator, (b)(6). 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 Industry Operations Investigator (b)(6)



# Enclosure

Cc: Federal Firearms Licensing Center St. Paul II Area Office



Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

Address: 8565 Hwy 65 NE

Blaine, MN 55434 Anoka County

#### 1 - Introduction

**Inspection Profile:** 

On 01/09/2017 through 01/13/2017 Investigators (b) (6)

conducted a firearm compliance inspection
on Capras Sporting Goods Inc., at 8565 Highway 65 NE, Blaine, MN. The
inspection was unannounced. Owner Dean Capra was interviewed. Firearm
Manager, Todd Lundstrom assisted with the inspection. The license expires
01/01/2018. On February 1, 2017 Investigator (b) (6)

returned to the
premises to conduct the inventory reconciliation and then on February 15, 2017
Investigator (b) (6)

Inspection Period: 01/09/2015-02/15/2017.

# **Business Profile:**

The licensee is a Type 01 Dealer in Firearms Other Than Destructive Devices. The business is a retail sporting goods storefront with regular business hours. The licensee acquired approximately firearms and disposed of firearms during the past year. The licensee deals in both new and used firearms and has various wholesale suppliers. The licensee does not conduct business at gun shows. The licensee advertises firearms for sale on the internet but does not conduct internet sales. The licensee is in compliance with zoning requirements. No other ATF licenses noted. The licensee had held the license since 2005.

#### **Ownership and Control:**

There are no changes in ownership. Mr. Dean Capra owns 100% of the company and is the sole responsible person on the license. The company has current registration with the Minnesota Secretary of State. However, the company is registered as Capra's Sporting Goods Inc. SIOI (b)(6) instructed the licensee to notify the Federal Firearms Licensing that the license was inaccurate. Mr. Capra stated he would contact the FFLC. SIOI (b)(6) will also forward the information to the FFLC. Further SIOI suggested the Firearm Manager, (b)(6) be added as a responsible person to the license. Mr. Capra was in agreement and stated he would look into that.

### Variance:

No variances are on file.

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

## 2 - Recommendation

Warning Letter, Report of Violation, Recall Inspection.

## 3 - Inspection History

**Date of Inspection:** 11/21/2005

**Type of Inspection:** Firearms Qualification Inspection

UI#: 778035-2006-0053-B1B

**Inspection Results:** License issued.

Cited Violations: None

# 4 - Acquisition & Disposition (A&D) Record - Inventory

A full inventory was conducted. There were 860 firearms in inventory. There were 1020 open entries. The gunsmith repair log is included in this inventory. The licensee failed to properly maintain the Acquisition and Disposition record on occasions. There were missing from inventory (commercial inventory), acquisitions not properly recorded and dispositions that failed to be recorded. An ATF Form 3310.11, Theft/Loss Report was submitted for the missing firearms. See Ex. 13 and Worksheet 1 for further information.

## References:

Item 13(10)- Violations, ATF F5030.5, Report of Violations Worksheet 1 Exhibit 4 – ATF F3310.11, Theft/Loss Report

### 5 - ATF Forms 4473 - NICS & Other Dispositions

There were 2518 ATF Forms 4473 on file for the inspection period. All forms were reviewed. There were forms where the licensee failed to obtain a properly completed ATF F4473 and retain the form as prescribed. There were no discrepancies with the FFL audit log. See Item 13(1-8) -Violations for further information, Ex. 5 and Worksheet 2. There were no sales to law enforcement.

#### References:

Item 13(1-8)-Violations, ATF F5030.5, Report of Violations Worksheet 2 Exhibit 5- ATF Forms 4473

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

## 6 - Multiple Sales

There were 45 Multiple Sales reported during the inspection period.

The licensee failed to complete and submit the ATF F3310.4, Report of Multiple Sales of Pistols and Revolvers in instances involving firearms.

#### References:

Item 13(9)- Violations, ATF F5030.5, Report of Violations Worksheet 2 Exhibit 6- ATF F3310.4, Multiple Sales Reports & ATF Forms 4473

# 7 - Suspicious/Prohibited Purchasers

The ATF Forms 4473 were reviewed and (b)(3) 112 Public Law 55 125 STAT 552 (b)(6) answered "Yes" to Item 11b as under indictment or information in any court for a received a delay with no further response from NICS. SIOI (b)(6) conducted further research and contacted ATF Liaison, (b) (6) indicated that was still under investigation. is possibly prohibited due to an assault. SIOI (b)(6) was unable to retrieve any further records from the Clerk of Courts or the arresting police department. A referral was forwarded to C/E for further investigation. In addition, a referral was also forwarded for (b)(3) 112 Public Law 55 125 STAT 552 (b)(6) for possibly dealing without a license or trafficking in purchased firearms during the inspection period. firearms. firearms were handguns. There were multiple sale reports dated 01/09/2016 and 12/02/2016 involving firearms. See Item 9-Referrals.

#### 8 - Trace Activity

There were successful traces during the inspection period. There are no unsuccessful traces noted.

## 9 - NFA/Importer/Collector/Manufacturer

There is no NFA/Importer/Collector/Manufacturer activity noted.

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

#### 10 - Referrals

Referrals were forwarded to C/E for (b)(3) 112 Public Law 55 125 STAT 552 (b)(6) with attachments as noted in Item 7.

### 11 - Other

The licensee complies with the Youth Handgun Safety Act and secure gun storage & safety devices.

NCIC/NLETS background checks conducted on the responsible persons revealed no prohibitions.

As noted in Item 7, NCIC/NLETS background checks were conducted on 13 non licensees which revealed 1 possibly prohibited person. See Items 7 and 10 for further information.

#### References:

See Items 7 & 10

# 12 - Closing Actions

On February 15, 2017, IOI (b) (6) returned to the premises to conduct the closing conference. Regulatory requirements were discussed with Owner and Responsible Person John Monson. The Acknowledgement of Federal Firearms Regulations and the Report of Violations, ATF F5030.5 was also discussed, signed and dated. Please see Item 13-Violations for further information on the licensee's response to the violations. The ATF F5030.5 was amended from instances under 27 CFR 478.124(c)(1) to instances where an additional ATF F4473 was added for urther research was conducted and a referral forwarded to C/E and 27 CFR 478.126(a) was amended from to instances after further review of the ATF Forms 4473...

### References:

ATF F5030.5, Report of Violations Exhibit 12 – Acknowledgment of Federal Firearms Regulations

#### 13 - Violations

1. **27 CFR 478.21(a)** 

#### **Nature of Violations:**

Failure to properly maintain the ATF F4473 as prescribed prior to the transfer of the firearm to a non-licensee on forms where the following items were discrepant.

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

Item 10a - Ethnicity information was blank

Item 11a - the transferee answered "No" to being the actual buyer

Item 18 - Certification date either blank or incorrect

Items 24 & 25 Recertification signature and date either blank or incorrect

Item 30a # of firearms either blank or incorrect

Item 33 - Transferor signature was blank

Item 35 - Transferor's title was blank

# **Licensee's Response:**

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

# **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation

Worksheet 2

Exhibit 5 – ATF Forms 4473

## 2. **27 CFR 478.124(c)(1)**

#### **Nature of Violations:**

Failure to properly complete the ATF F4473 prior to the transfer on forms where the following items were discrepant.

Item 2 - Address either blank or incorrect

Item 3 - Place of birth either blank or incorrect

Item 10b - Race was blank

Item 11b – "Yes" to under indictment or information in any court for a felony...

Item 11d - Fugitive from Justice blank

Item 11e - "...Unlawful user of, or addicted to...controlled substances" Blank

Item 11j - "...renounced your citizenship" - Blank

Item 11k - "...alien illegally in the United States" - Blank

Item 111 -"Alien admitted to the United States..." blank on ( forms)

Item 13 - State of Residence blank

Item 14 - Country of citizenship blank

Item 16- Transferee signature blank

Item 17 - Certification date blank or incorrect on ( forms)

#### Licensee's Response:

 Name:
 Capra, Dean
 UI#:
 778035-2017-0091-B1B

 Trade Name:
 FFL#:
 3-41-003-01-8A-01773

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

## **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation Worksheet 2 Exhibit 5 – ATF Forms 4473

#### 3. **27 CFR 478.124(c)(3)(i)**

#### **Nature of Violations:**

Failure to either obtain the proper government issued identification or incorrect identification was identified on forms.

# Licensee's Response:

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

# **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation Worksheet 2 Exhibit 5 – ATF Forms 4473

### 4. 27 CFR 478.124(c)(3)(iv)

#### **Nature of Violations:**

Failure to obtain a properly completed ATF F4473 prior to the transfer of the firearm on forms where the licensee failed to either record the NICS background information or provided incorrect NICS background information. The following discrepant instances were noted.

Item 21a - The date the licensee contacted NICS was either blank or incorrect

 Name:
 Capra, Dean
 UI#:
 778035-2017-0091-B1B

 Trade Name:
 FFL#:
 3-41-003-01-8A-01773

Item 21b - The NICS Transaction Number was blank. Additionally there were duplicate NTN's used on different forms - forms)

Item 21c - The NICS response was blank or incorrect

Item 21d - The NICS response after a "Delay" was either blank or incorrect.

#### Licensee's Response:

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

# **Corrective Action:**

SIOI (b) (6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation Worksheet 2
Exhibit 5 – ATF Forms 4473

# 5. **27 CFR 478.124(c)(4)**

#### Nature of Violations:

Failure to obtain a properly completed ATF F4473 prior to the transfer of the firearm on forms where the firearms information was incomplete. [5](3) 112 Public Law 55 125 STAT 552 (b)(6)

Item 26 Manufacturer/Importer-Blank

Item 27 Model - Blank

Item 28 Serial Number - Blank

Item 29 Type of Firearm - Blank

Item 30 Caliber or Gauge - Blank

#### Licensee's Response:

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

#### **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation Worksheet 2
Exhibit 5 – ATF Forms 4473

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

### 6. **27 CFR 478.124(c)(5)**

### **Nature of Violations:**

Failure to obtain a properly completed ATF F4473 prior to the transfer of the firearm on forms where transferor signature and transfer date were blank

## **Licensee's Response:**

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

# **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm.

#### References:

ATF F5030.5, Report of Violation Worksheet 2 Exhibit 5 – ATF Forms 4473

# 7. 27 CFR 478.102(a)(2)(ii)

#### **Nature of Violations:**

Failure to allow the elapse of 3 business days from the date the licensee contacted NICS and NICS has not notified the licensee that the receipt of the firearm by the transferee would be in violation of the law. (b)(3) 112 Public Law 55 125 STAT 552 (b)(6)

### Licensee's Response:

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

#### **Corrective Action:**

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm. NCIC background check was negative for any firearm prohibitions.

#### References:

ATF F5030.5, Report of Violation Worksheet 2
Exhibit 5 – ATF Forms 4473

### 8. **27 CFR 478.102(c)**

Name: Capra, Dean UI#: 778035-2017-0091-B1B Trade Name: FFL#: 3-41-003-01-8A-01773

#### **Nature of Violations:**

Failure to adhere to the NICS check time limitation where 30 days had elapsed. (b)(3) 112 Public Law 55 125 STAT 552 (b)(6)

## Licensee's Response:

The licensee stated the errors were oversights. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

**Corrective Action:** 

SIOI (b)(6) instructed the licensee to obtain a properly completed ATF F4473 prior to the transfer of the firearm. NCIC background check revealed no firearm prohibitions.

#### References:

ATF F5030.5, Report of Violation Worksheet 2
Exhibit 5 – ATF Forms 4473

# 9. **27 CFR 478.126(a)**

### **Nature of Violations:**

Failure to complete and submit the ATF F3310.4, Multiple Sale or Other Disposition of Pistols and Revolvers in instances involving firearms. (b)(3) 112 Public Law 55 125 STAT 552 (b)(6)

#### Licensee's Response:

The licensee stated the errors were oversights and that in the review for multiple sales they missed these purchases. The licensee is implementing another layer of review prior to the transfer of the firearm to avoid such errors in the future.

#### **Corrective Action:**

SIOI (b)(6) instructed the licensee to complete and submit an ATF F3310.4 prior to the transfer of the firearms.

## References:

ATF F5030.5, Report of Violation

Worksheet 2

Exhibit 6- ATF F3310.4, Multiple Sales Reports & ATF Forms 4473

### 10. **27 CFR 478.125(e)**

# **Nature of Violations:**

 Name:
 Capra, Dean
 UI#:
 778035-2017-0091-B1B

 Trade Name:
 FFL#:
 3-41-003-01-8A-01773

Failure to properly maintain the Acquisition and Disposition Record on occasions

instances where the disposition failed to be recorded

firearms missing from inventory. Theft/Loss report submitted ON 01/31/17.

instances where other acquisition information failed to be recorded to include the manufacturer/importer & serial number (gunsmith record).

The Federal Firearms License number failed to be recorded upon acquisition.

The gunsmith record failed to have the proper disposition headings of Name, Address, and Disposition date and no importer information was recorded upon acquisition.

## Licensee's Response:

The licensee stated that the majority of errors were a part of the gunsmith repair log being not properly maintained. The licensee has not conducted a complete audit where the inventory is compared to the records in many years. The licensee stated they conduct a physical inventory every day. The missing firearms were all within the commercial inventory and the licensee stated they only do spot checks of the record book. Theft/Loss report submitted on 01/31/2017.

### **Corrective Action:**

SIOI (b)(6) instructed the licensee to properly maintain the Acquisition and Disposition as required. Theft/Loss Report submitted on 01/31/2017.

#### References:

ATF F5030.5, Report of Violation Worksheet 1 Exhibit 4 – ATF F3310.11, Theft/Loss Report



Industry Operations Investigator Signed by: ATF

# **Index of Worksheets and Exhibits**

Revised 7/1/15

Page 10 of 11

 Name:
 Capra, Dean
 UI#:
 778035-2017-0091-B1B

 Trade Name:
 FFL#:
 3-41-003-01-8A-01773

References:

ATF F5030.5, Report of Violation

Worksheet 1 Worksheet 2

Exhibit 4 – ATF F3310.11, Theft/Loss Report

Exhibit 5 – ATF Forms 4473

Exhibit 6- ATF F3310.4, Multiple Sales Reports & ATF Forms 4473

Exhibit 12 – Acknowledgment of Federal Firearms Regulations