

REGULAR

See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

| | | | |
|------------------|---|---|------------------|
| OAL FILE NUMBERS | NOTICE FILE NUMBER Z-2018-0925-03 | REGULATORY ACTION NUMBER 2019-0415-05 S | EMERGENCY NUMBER |
|------------------|---|---|------------------|

For use by Office of Administrative Law (OAL) only

| | |
|---|--------------------|
| <p>2019 APR 15 P 2:43</p> <p>OFFICE OF ADMINISTRATIVE LAW</p> | |
| <p>NOTICE</p> | <p>REGULATIONS</p> |

| | |
|---|---|
| AGENCY WITH RULEMAKING AUTHORITY Department of Justice | AGENCY FILE NUMBER (if any) DOJ-18-006 |
|---|---|

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

| | | | |
|---|---------------------------|------------------------|-------------------------------|
| 1. SUBJECT OF NOTICE | TITLE(S) | FIRST SECTION AFFECTED | 2. REQUESTED PUBLICATION DATE |
| 3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other | 4. AGENCY CONTACT PERSON | TELEPHONE NUMBER | FAX NUMBER (Optional) |
| OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn | ACTION ON PROPOSED NOTICE | NOTICE REGISTER NUMBER | PUBLICATION DATE |

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

| | |
|--|--|
| 1a. SUBJECT OF REGULATION(S) California Firearms Application Reporting System | 1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) |
|--|--|

| | | | | |
|--|--|---------------------|---------------------|----------------------|
| 2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related) | | | | |
| <table border="1"> <tr> <td rowspan="3">SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)</td> <td>ADOPT 4340</td> </tr> <tr> <td>AMEND 5474, 5513</td> </tr> <tr> <td>REPEAL 5473, 5512</td> </tr> </table> | SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.) | ADOPT 4340 | AMEND 5474, 5513 | REPEAL 5473, 5512 |
| SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.) | | ADOPT 4340 | | |
| | | AMEND 5474, 5513 | | |
| | REPEAL 5473, 5512 | | | |
| TITLE(S) 11 | | | | |

| |
|---|
| 3. TYPE OF FILING |
| <input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) <input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only |

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))
 Effective on filing with Secretary of State
 §100 Changes Without Regulatory Effect
 Effective other (Specify) **July 1, 2019**

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

Department of Finance (Form STD. 399) (SAM §6660)
 Fair Political Practices Commission
 State Fire Marshal
 Other (Specify) _____

| | | | |
|-----------------------------------|------------------------------------|-----------------------|--|
| 7. CONTACT PERSON Kelan Lowney | TELEPHONE NUMBER (916) 227-7615 | FAX NUMBER (Optional) | E-MAIL ADDRESS (Optional) Kelan.Lowney@doj.ca.gov |
|-----------------------------------|------------------------------------|-----------------------|--|

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

| | |
|---|-----------------|
| SIGNATURE OF AGENCY HEAD OR DESIGNEE | DATE 4/12/19 |
| TYPED NAME AND TITLE OF SIGNATORY Sean McCluskie, Chief Deputy to the Attorney General | |

For use by Office of Administrative Law (OAL) only