



CALIFORNIA DEPARTMENT OF JUSTICE
BUREAU OF FIREARMS
**Compliance Test Report
(Firearm Safety Devices)**



The DOJ-Certified Laboratory identified below has completed testing required by California Penal Code section 23655 and is submitting this Compliance Test Report as required by the California Code of Regulations, title 11, section 4097. The laboratory reference number should refer specifically to the testing of the named FSD, not to the laboratory in general. The number must be noted in the space provided on each page of this report.

DOJ-CERTIFIED LABORATORY INFORMATION

Laboratory Reference Number:		Date Submitted:	
DOJ-Certified Laboratory Name:			
Address:	City:	State:	Zip Code:
Test Date:	Telephone Number:		
Off-site location used: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, Address:	City:	State:	Zip Code:
Name of Laboratory staff who conducted and/or performed the required testing:		Title:	
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Compliance Test Report (Firearm Safety Devices)



Laboratory Reference Number:

FIREARM SAFETY DEVICE INFORMATION

FSD Submitted by:

Address: City: County: State: Zip Code:

Country: Contact Person: Telephone Number:

FSD Type (Check one):
☐ Safe ☐ Lock Box ☐ Cable Lock ☐ Padlock
☐ Other, please describe _____

Make: Model:

Material(s) (i.e., stainless steel, alloy, etc.): Weight:

FIREARM INFORMATIONTested on which firearm(s):
☐ Revolver ☐ Pistol (Rimfire) ☐ Shotgun ☐ Rifle ☐ Pistol (C.F.)
☐ Other, please describe _____

Make: Model: Caliber: Barrel Length:

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PRIMED CASE INFORMATION

Primed Cases Used:

Manufacturer:

Primer:

☐ No primed case was used. (When FSD is properly installed, the firearm is incapable of accepting cartridges.)



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Laboratory Reference Number

FSD TEST RESULTS

Please indicate if the FSD passed or failed an applicable test by checking the boxes below. If a specific test was not performed, provide a brief explanation in the space provided. If the FSD failed a specific test, check the boxes and provide a brief explanation in the space provided. Attach a photo of the FSD after each completed test.

- ☐ The tested device meets all of the applicable standards listed below.
- ☐ The tested device does not meet all of the applicable standards listed below.

FSD TESTING SAMPLE #1

- | | | | |
|--|-------------------------------|-------------------------------|------------------------------|
| 1. Picking or manipulating test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |
| 2. Tensile test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |
| 3. Shock impact test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |
| 4. Shackle or cable cutting test - In addition, provide measurements and a description, or measurements and a diagram, of where the shackle and/or cable was attacked. | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |

Explanation/Comments:

FSD TESTING SAMPLE #2

- | | | | |
|------------------------|-------------------------------|-------------------------------|------------------------------|
| 1. Plug torque test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |
| 2. Forced removal test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |
| 3. Forced entry test | <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | <input type="checkbox"/> N/A |

Explanation/Comments:



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FSD Test Results Continued



FSD TESTING SAMPLE #3

1. Sawing test - In addition, provide measurements and a description, or measurements and a diagram, of where the firearm safety device was attacked.

☐ Pass

☐ Fail

☐ N/A

2. Plug pulling test - If the self tapping screw was not inserted at least 3/4-inch as described in the testing procedure, provide the depth to which the self tapping screw was inserted and explain why it was not inserted at least 3/4-inch.

☐ Pass

☐ Fail

☐ N/A

Explanation/Comments:

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FSD TESTING SAMPLE #4

1. Drop test

☐ Pass

☐ Fail

☐ N/A

Explanation/Comments:

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Laboratory Reference Number

FSD STANDARDS (Complete this section whether FSD passed or failed.)

The tested FSD meets the standards listed in the California Code of Regulations, title 11, section 4094.

The FSD is of a design that will not allow its removal or deactivation except by utilizing a key, combination, or other unique method as intended by the manufacturer to allow access only by authorized users. Indicate the locking system by checking the appropriate box below.

- ☐ If a combination locking system, there are a minimum of 1,000 possible combinations consisting of a minimum of three numbers, letters, or symbols per combination.
- ☐ If a key locking system, the key locking system shall be unique to the manufacturer's FSDs.
- ☐ Electronic
- ☐ Biometric
- ☐ Other, please describe _____

The FSD renders the firearm inoperable (unable to be fired) while the FSD is properly installed.

- ☐ Yes
- ☐ No

The FSD functions by at least one of the following methods. Indicate all applicable methods by checking the appropriate box(s) below.

- ☐ By blocking travel of the trigger, striker, firing pin, or hammer.
- ☐ By preventing the action or cylinder from closing.
- ☐ By preventing the chamber(s) from accepting or holding cartridge.
- ☐ By preventing access to the firearm.

The FSD is capable of repeated use.

- ☐ Yes
- ☐ No

I certify under penalty of perjury under the laws of the State of California that the foregoing, any attachments, and/or enclosures are true and correct.

Signature of Certificate of Eligibility (COE) Holder:

Date:

Printed Name of COE Holder, Title:

Telephone Number:



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Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The Division of Law Enforcement in the Department of Justice collects the information requested on this form as authorized by Penal Code section 23655. The Division of Law Enforcement uses this information to establish eligibility for laboratory certification and firearm safety device testing. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided. If you fail to provide any of the required personal information, the unprocessed report will be returned to you for completion and resubmission.

Access to Your Information. You may review the records maintained by the Division of Law Enforcement in the Department of Justice that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to ensure you are not prohibited and establish eligibility for laboratory certification and firearm safety device testing, we may need to share the information you give us with entities as authorized in Penal Code section 11105. The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes;
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Staff Services Analyst in the Customer Support Center at (916) 227-7527, via email at firearms.bureau@doj.ca.gov, or by mail at P.O. Box 160487, Sacramento, CA 95816-0487.