FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
EMPLOYEES' COMPENSATION ACT, 2010
Employees' Schedule of Payments

DOMEX SYNERGY LIMITED

SN	Employee First Name	Employee Middle Name	Employee Last Name	Employee Address	DOB	Gender	Marital Status	Employee ID	Employment Date	Employee Email	Job Title	State of Origin	Local Government Area	Town	Contact Phone	Alternate Phone	Means of Identity	Means of Identity Number	Means of Identity Issue State	Next of Kin	Next of Kin Number	NO of Dependants	Monthly Remuneration
1	ALIEZE	CHISOM	DOMINIC	Annex 4 Bataiya Plaza Area 11 Garki		male	Single	01	12/10/20	Felixchisom@gmail.com	MD	IMO	Ikeduru	Ikeduru	09135051507	—	NATIONAL ID	24269761202	ABUJA	Eze Ogechukwu	08062923579	1	30,000
2	Opegbu	Justus	Chibuzo	4 Hajiya Zamkiye Abuja	8/6/90	male	SINGLE	02	12/10/20	Felixchisom@gmail.com	Secretary	IMO	Ikeduru	Ikeduru	08068081110	—	National ID	61944746339	Abuja	Opegbu Nicholas	09087554112	1	30,000
3	Opegbu	Barnabas	Chukwuike (?)	4 Orakwe Str Awada Onitsha	3/3/84	male	Single	03	12/10/20	Flexichisom3@gmail.com	marketer	IMO	Ikeduru	Ikeduru	08062806230	—	National ID	6455582210	Abuja	Obinna Opegbu	07066102902	1	30,000
4																							
5																							
6																							

October 2021 - Dec 2022

= 15 months x 900 = ₦13,500

1% x ₦90,000 = 900

DOMEX SYNERGY LIMITED

ECS.RE01

FEDERAL REPUBLIC OF NIGERIA

NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)

(Employees' Compensation Act, 2010)

Registration of Employer

Section 39(1)

Mark 'X' as Appropriate

Public/Private Companies [ ] Informal Sector Employer [ ] Partnership [ ]
Sole Proprietorship [ ] Others (please specify) [ ]

PART 1: PARTICULARS OF BUSINESS (for MDAs, public and private companies):

1.1 Employer Name: DOMEX SYNERGY LIMITED

1.2 Incorporation Number: 1849864 1.3 Address: Street Number: Annex 4

Street Name: Battalyk Plaza Area 11 City: Garki Abuja

Local Govt: AMAC State: FCT

1.4 Postal Address: Same as above

1.5 Tel Number: 09135051507 1.6 Fax Number:

1.7 Email: Felixchisom3@gmail.com

1.8 Does Employer operate in other locations? Yes [ ] No [✓] 1.9 If yes give details: ——

1.10 If yes in 1.9, do you intend to pay contribution centrally? Yes [ ] No [ ].

1.11 Act? Yes [ ] No [ ]

PART 2: PARTICULARS OF OWNER(S) OF ORGANIZATION (for Partnership & Sole Proprietorship):

2.1 Surname: AHIEZE Middle Name: DOMINIC

First Name: CHISOM Position: MD

Tel. Number: Mode of identification: National I.D. [ ] or Drivers Licence [ ] or International Passport [ ] Specify ID. Number: 24269761021

PART 3: BUSINESS SECTOR CATEGORIES:

Construction [ ] Mining [ ] Banking & Finance [ ] Manufacturing [ ] Aviation [ ]

MDAs [ ] Oil & Gas [ ] Agriculture [ ] Energy [ ] Telecom [ ] Others (please specify): ✓

General Contract

PART 4: DECLARATION BY EMPLOYER OR AUTHORISED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: [signature] Position: MD Date: 1/3/22

Surname AHIEZE First Name: Chisom Official Stamp (if any): ....

National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)

Tracking ID:	S7Y0NYF8V000A6K	**Surname:**	ALIEZE	Address: NO 3, MOUBUIKE STREET.
NIN:	24269761021	**First Name:**	CHISOM	
Issue Date:	N/A	**Middle Name:**	DOMINIC	
		Gender:	M	OKPOKO AN

Note: The ***National Identification Number (NIN) is your identity.*** It is confidential and may only be released for legitimate transactions.

You will be notified when your National Identity Card is ready (for any enquiries please contact)

helpdesk@nimc.gov.ng	www.nimc.gov.ng	0700-CALL-NIMC (0700-2255-646)	National Identity Management Commission 11, Sokode Crescent, Off Dalaba Street, Zone 5 Wuse, Abuja Nigeria