

FEDERAL REPUBLIC OF NIGERIA

NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)

(EMPLOYEES' COMPENSATION ACT, 2010)

EMPLOYEES' SCHEDULE OF PAYMENT

(ANY WRONG INFORMATION/DECLARATION IS AN OFFENCE AND IS PUNISHABLE UNDER SECTION 39, 40 AND 65 OF THE ECA 2010)

S/N	EMPLOYEE FIRST NAME	EMPLOYEE MIDDLE NAME	EMPLOYEE LAST NAME	EMPLOYEE ADDRESS	DATE OF BIRTH	GENDER	MARRITAL STATUS	EMPLOYEE ID	EMPLOYMENT DATE	EMPLOYEE EMAIL	JOB TITLE	STATE OF ORIGIN	L.G.A	TOWN	CONTACT PHONE NO.	ALTERNATE NUMBER	MEANS OF IDENTITY	MEANS ID ISSUED STATE	NEXT OF KIN	NO. OF DEPENDANTS	SALARY, MONTHLY
1	GLORIA	EMMANUEL	OJUMA			F	S	001	1st March 2022	premiuminformation@gmail.com	CEO				07088440112		NIF	ARZ		NIL	40,000
2	ATIM	ATIM	ZIKRA			F	S	002			MGZ	Grum	Grum	Grum							30,000
3	ABUBAKAR	ABDULLAH	AKIRU			M	S	003			MGZ	Grum	Grum	Grum	07033539994		NIF	ARZ			30,000
4																					
5																					
6																					
7																					
8																					
9																					
10																					

THIS FORM SHOULD BE DULY COMPLETED AND SUBMITTED BY THE EMPLOYER TO REFLECT THE ESTIMATE OF EARNINGS OF THE EMPLOYEES.
THIS FORM SHOULD BE COMPLETED ANYTIME PAYMENT IS MADE.

GLORIA E.

196 = 169,000

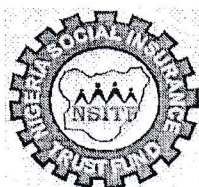
= 1,000 x 23 months

23,000

2022-12-23

100,000

191



FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
 (Employees' Compensation Act, 2010)

Registration of Employer

(Any wrong information/declaration is an offence and is punishable under Sections 39 and 65 of the ECA 2010)

PART 1: TYPE OF BUSINESS

(Mark 'X' as Appropriate)

Public/Private Limited Company ☒ Informal Sector Employer ☐ Partnership ☐ Sole Proprietorship ☒

Others (please specify) ☐

PART 2: ORGANIZATION/EMPLOYER INFORMATION:

2.1 Employer Name: PREMIER INNOVATION CONSULT LTD

2.2 Incorporation Number: RC1895077 2.3 Address: TFS

LAKEVIEW HOMES PHASE 1, KADO, ABUJA FCT.

Local Govt.: ANMA C State: FCT

2.4 Postal Address:

2.5 Tel. No. 1: 08033534992 Tel. No. 2:

2.7 Email: gloriyanoyqa@gmail.com

2.8 Does Employer have other branches and subsidiaries? Yes ☐ No ☒. If "Yes", fill attached form (ECS RE01b)

2.9 Year of Establishment/Incorporation: 17 02 2022

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: EMMANUEL Middle Name: UJOMA

First Name: GLORIA Position: CEO

Tel. Number: 08033534992 Mode of Identification: National ID. ☒

Driver's License ☐ International Passport ☐ Specify ID. Number: 77111634649

PART 4: BUSINESS SECTOR CATEGORIES:

Construction ☐ Mining ☐ Banking & Finance ☐ Manufacturing ☐ Aviation ☐

MDAs ☐ Oil & Gas ☐ Agriculture ☐ Energy ☐ Telecom ☐ Others (please specify):....

General Contractor

PART 5: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumbprint: Position: Date: 18/1/23

Surname: Emmanuel First name: Gloria O. Official Stamp (if any):

National Identity Management System			
Federal Republic of Nigeria			
National Identification Number Slip (NINs)			
Issuing ID: 570WFL7008LX	Surname: EMMANUEL	Address: BEHIND GLOBAL VILLAGE HOTEL	
NIN: 7711534619	First Name: GLORIA		
	Middle Name: OJOMA		
	Gender: F	No. KOGODUWA	
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@nime.gov.ng	www.nime.gov.ng	070-CALL-NIMC (070-225-446)	National Identity Management Commission 11, Sakuba Crescent, Off Oshodi Road, Zone 5, State Capital, Lagos