



FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
EMPLOYEE COOPERATION ACT, 2019
Employee Schedule of Payment

For annual distribution to be effective, it is imperative that employees be paid and be at the end of the year.

S/N	Employee First Name	Employee Middle Name	Employee Last Name	Employee Address	DO B	Gender	Marital Status	Employee ID	Employee Date	Employee Email	Job Title	State of Origin	Local Government Area	Town	Conf. Act	Alter. P	Means of Identity	of Identity Number	of Identity Issue	Next of Kin	Next of Kin Number	NO of Dependant	Monthly Remuneration	
1	EMKE	CHINDE	AKINSE	BLK A3 Shynple Estate Delt 9	17/06/09	MALE	MARRIED	0007		emake@phw.com	MANAGER	Delt 9	ANIOCHA	ANIOCHA	0805958836		Notified ID	25212006	2802	ANICEM	08165713	917		20,000
2	FRANCS	CHINDE	AKINSE	BLK A3 Shynple Estate Delt 9	20/10/17	MALE	MARRIED	0007		francs@phw.com	LOGISTICS	IMO	OVERRI NORTH	OVERRI NORTH	080440006		Notified ID			NANCY NWADU	081334922			20,000
3	OLABODE	AKINSE	MI	BLK A3 Shynple Estate Delt 9	01/08/22	MALE	MARRIED	0005		olabode@phw.com	SECRETARY	OKITI	ARADIMO NORTH	ARADIMO NORTH	0802847776		Notified ID	8150138	1031	MARIAM AKINSE	070446874			20,000
4																								
5																								
6																								

July 2021 - Dec 2022

90,000 x 190 = 9000

18 months x 900 =

16,200 / Account Dept

24/1/22

90,000

July 2021

Dec 2022

90,000 x 170 = 2900

16,000 x 900 =

16,000 / Account Dept
Date 24/1/22

90,000



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: PRIMEGRID RENEWABLE ENERGY LIMITED
- 1.2 Incorporation Number: 1817460 1.3 Address: Street Number: Block A3
- Street Name: 158PC ESTATE ESEPH City: DEDEA
- Local Govt: SUYNAME CLOSE State: DEDEA
- 1.4 Postal Address:
- 1.5 Tel Number: 08069252293 1.6 Fax Number:
- 1.7 Email: actor14834@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: ASHIBUOGWU Middle Name: Ebenezer
- First Name: EMEKE Position: MANAGER
- Tel. Number: 08069252293 Mode of identification: National I.D. ☐ or Drivers Licence ☐ or International Passport ☐ Specify ID. Number:

PART 3: BUSINESS SECTOR CATEGORIES:

- Construction ☐ Mining ☐ Banking & Finance ☐ Manufacturing ☐ Aviation ☐
- MDAs ☐ Oil & Gas ☐ Agriculture ☐ Energy ☒ Telecom ☐ Others (please specify):

PART 4: DECLARATION BY EMPLOYER OR AUTHORISED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: EMEKE Position: MANAGER Date: 24/01/22

Surname: ASHIBUOGWU First Name: EMEKE Official Stamp (if any):

 National Identity Management System Federal Republic of Nigeria National Identification Number Slip (NINS)							
Tracking ID: 0700000001100		Surname: AGHOGGWA		Address: 12345 ADEOLA STREET, SHOMOLE LOCAL			
NIN: 43212345678		First Name: EMERE					
		Middle Name: ERENEZER					
		Gender: M		Age: 35			

Now The National Identification Number (NIN) is your identity. It is essential and may only be obtained for legitimate transactions. You will be notified when your National Identity Card is ready. For any enquiries please contact:

 helpline@nins.gov.ng	 www.nins.gov.ng	 0700-CALL NIN (0700-2250444)	 National Identity Management Commission
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Now The **National Identification Number (NIN)** is your identity. It is essential and may only be released for legitimate transactions as well as needed when your National Identity Card is ready. If any wrongs, please contact