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	LG.A	TOWN	CONTACT PHONE NO.	ALTERNATE NUMBER	MEANS OF IDENTITY	MEANS ID ISSUED STATE	NEXT OF KIN	NO. OF DEPENDANTS	SALARY, MONTHLY
1	HASSAN	YASSIN	MOUSA	15A MUNDUBAWA AVENUE KANO	SEPTEMBER 1983	M	SINGLE		OCTOBER 27 2022	MOUSAYASSIN@GMAIL.COM	MD				08166664603		NATIONAL ID	ABUJA			30,000
2	FRANK	OJEAB URU		BEHIND STADIUM	MARCH 1980	M	SINGLE		OCTOBER 27 2022		STAFF				08035995068						30,000
3	ALI	YASSIN	YASSIN	15 A MUN DUBAWA KANO	AUGUST 1986	M	SINGLE		OCTOBER 27 2022	ALIYASSIN@GMAIL.COM	STAFF				0816 9676 655						30,000
4																					
5																					
6																					
7																					
8																					
9																					
10																					

November 2022 — December 2023

~~₦~~ 900 X 14 month

~~₦~~ 12,600 / Account Dept

~~Abdul~~ 09/1/2023

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.

POSITION

ECS.RE.01a

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: STAR FIXIT SOLUTIONS LIMITED

2.2 Incorporation Number: 1992357

2.3 Address: NO 15A MUNDUBAWA AVENUE KANO STATE

Local Govt.:

State: KANO

2.4 Postal Address:

2.5 Tel. No. 1: 08166666403

Tel. No. 2:

2.7 Email: MOUSSAYASSIN33@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: 20/10/2022

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: MOUSA Middle Name: YASSIN

First Name: HASSAN Position: MD

Tel. Number: 08166666403 Mode of Identification: National ID. ✓

Driver's License [ ] International Passport [ ] Specify ID. Number: 61111792410i

PART 4: BUSINESS SECTOR CATEGORIES:

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

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

.....

PART 5: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumbprint:..... Position: Managing Director Date: 09-01-2023

Surname: MOUSA First name: HASSAN Official Stamp (if any):.....

National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)

ng ID: S7Y0NYFL50008TD	Surname: YASSIN	Address: 15A MUNDUBAWA AVENUE BOMPAI GRA	
61117924101	First Name: MOUSA		
	Middle Name: HASSAN		
	Gender: M	KANO KN	

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

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

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