

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 33, 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.	INTERMEDIATE NUMBER	MEANS OF IDENTIFY	MEANS ID ISSUED STATE	WEEK OF KIN	NO. OF DEPENDANTS	SALARY, MONTHLY
1	MAMUN		OSAYUNWA		11/07/1971	M	MARRIED	1	15/01/2021	osayunwa@naitf.com	MANAGER	OSUN	AWA	OSHOGBE	0905748862	NIL	N/A	FCT	ESTHER	1	30,000
2	ABDULLAH		ZAINAB		28/11/1980	F	MARRIED	1	15/01/2021	zainab@naitf.com	SECRETARY	GOMBE	LOKA	GOMBE	0813257685	NIL	N/A	FCT	ADAMU	1	30,000
3	HUSSEINI		MUSA	NID 8, BIRNIS DRIVE JIKWAYI ABUJA	01/11/1991	M	SINGLE	1	01/01/2021	musa@naitf.com	CLERK	GOMBE	LOKA	GOMBE	0705507957	NIL	N/A	FCT	HAWWA	1	30,000

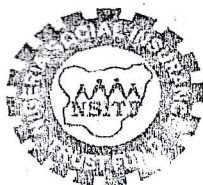
900 X 18 MONTH

= 16,200.00

Account Dept

13/07/2023

90,000 X 1/2 = 45,000



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: **ZUWY NIGERIA LIMITED**

2.2 Incorporation Number: **1839958**

2.3 Address: **NO 8**

BENNIS DRIVE

JI KWOYI ABUJA

Local Govt.: **AMAC**

State: **ECT**

2.4 Postal Address:

2.5 Tel. No. 1: **09057985069**

Tel. No. 2:

2.7 Email: **zuwy@hotmail.com**

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

2.9 Year of Establishment/Incorporation: **13 09 2021**

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: **IYAMU**

Middle Name: **OSAZUWA**

First Name: **MONDAY**

Position: **MANAGER**

Tel. Number: **09057985069**

Mode of Identification: National ID. ☒

Driver's License ☐ International Passport ☐ Specify ID. Number: **66707785432**

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: **MANAGER** Date: **12/1/2023**

Surname: **IYAMU** First name: **MONDAY** Official Stamp (if any):



National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)



Tracking ID: S1E9NVQ8BMV0182

NIN: 66707785432

Surname: IYAMU

First Name: OSAZUWA

Middle Name: MONDY

Gender: M

Address:

1 OSAZUWA IYAMU CLOSE OFF UGBOR
GRA

BENIN

ED



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 Dababa Street, Zone 5 Wuse, Abuja Nigeria