

Form Ref: \* 0 2 3



# Leadway Pensure PFA Ltd

## RSA REGISTRATION & TEMPORARY PIN REGULARISATION FORM

\* Mandatory Field \*\* Conditionally Mandatory Field

Registration Type: \*

New Registration:  New TPIN:  TPIN Regularisation:

TEMPORARY PIN: \*\* (If available)

### 1. PERSONAL DATA

Title: \*  (Mr, Mrs, Miss, Ms) Gender (M/F): \*  Marital Status (MD/SG/DV/SP/WD): \*  Date of Birth: \* DD / MM / YYYY

Surname \*

First Name: \*

Middle Name:

Maiden Name:

Place of Birth (City): \*

State of Origin: (If Nigerian) \*\*  LGA of Origin: \*\*

Nationality: \*

BNV:  Primary Bank Name:

NIN: \*  Account Number:

Residential Address:  Nigeria  Abroad \* House No/Name:

Street Name:

Village/Town/City: \*\*  LGA: \*\*

State of Residence: \*\*  Country of Residence: \*

Postcode/Zipcode: \*\*  P.O. Box or PMB (if any):

Personal E-Mail Address:

Country Code: \*  Mobile No: \*  Secondary Number:

Kindly tick one preferred social media network from the boxes & fill in the matching handle.

Instagram  Facebook  Twitter  Handle:

### 2. EMPLOYMENT DETAILS (THE MOST RECENT EMPLOYER) - Please indicate the employer sector

Employer Sector Classification \*

1 - Federal Govt  2 - State Govt  3 - Private Registered Companies - (Ltd) and (Plc)  4 - Business Names  5 - Foreign Agencies   
6 - Embassies  7 - Non-GovtI Organisations  8 - Unions  9 - Micro-Pension Plan Employers  10 - Cross Border Employers

Employer Name (in full): \*\*

Employers Current Business Location

Nigeria  Abroad \* Building No/Name:

Street Name:

Village/Town/City: \*\*  LGA: \*\*



20191010

#ThePensureAdvantage



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State: \*\* Country:\* Postcode/ Zipcode: \*\* P.O. Box or PMB (if any): Phone No - Country Code: + Mobile Number: Nature of Business: \* (informal sector): Date of First Appointment: \*\* DD / MM / YYYY Date of Current Appointment: DD / MM / YYYY Designation/ Rank: \*\*

3. NEXT OF KIN

Title: \* Gender (M/F): \* Surname: \* First Name: Middle Name: Relationship: \*

Correspondence Address: Nigeria Abroad \* House No/ Name: Street Name: Village/Town/ City: \*\* LGA: \*\* State of Residence: \*\* Country of Residence \*\* (If based abroad): Postcode/ Zipcode: \*\* P.O. Box or PMB (if any): Email Address: Phone No - Country Code: \* Mobile Number: \*

4. CONTRIBUTOR'S CERTIFICATION

\* I hereby certify that the information provided in this form is accurate and complete in all material respects. I consent and authorize the National Identity Management Commission (NIMC) to release information on my National Identity Number (NIN) (as may be required) to the National Pension Commission (PenCom), upon request by my Pension Fund Administrator (PFA), for the maintenance and operation of my Retirement Savings Account. I further consent to and authorize my PFA to correct any information I have filled in this form to align with my information on the NIMC database. It is my understanding that my PFA and PenCom shall exercise due care to ensure that my information is secure and protected.

Signature: \*\* (Sign within box) Date: \* DD / MM / YYYY

5. PFA CERTIFICATION

Name: Designation:

Signature: \* (Sign within box) Date: \* DD / MM / YYYY

6. CHECKLIST OF REQUIRED DOCUMENTS

\* (please tick the appropriate box) Means of Identification Proof of Address Birth Certificate or Age Declaration Letter of Appointment/Employment

PIN: P E N



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