



**SOCIAL SECURITY AND NATIONAL INSURANCE TRUST
NATIONAL PENSIONS ACT, 2008 (ACT 766)**

No. 0936569

CLEARANCE CERTIFICATE

ISSUING BRANCH OFFICE.....**ACCRA INDUSTRIAL AREA**..... DATE OF ISSUE.....**09/06/2017**.....

NAME OF ESTABLISHMENT:.....**COUNTRY OIL COMPANY LIMITED**.....

ER. NO:.....**201704444**..... NATURE OF BUSINESS:.....**OIL SERVICES**.....

BUSINESS REG. NO.....**CS097462016**..... IRS TIN.....**C00006595634**.....

ADDRESS.....**POST OFFICE BOX AN 5443, ACCRA-NORTH**.....

LOCATION OF ESTABLISHMENT:.....**OPPOSITE GRAPHIC CORPORATION ANNEX**.....

TEL NO:.....**NIL**..... MOBILE PHONE NO:.....**0208156947/0240799000**.....
(Establishment) **1ST MAY, 2017** (Contact Person)

COVERABLE DATE:.....

The above-named Establishment in compliance with the provisions under the **NATIONAL PENSIONS ACT, 2008 (Act 766)** has applied for a **Clearance Certificate** for the following purpose(s):

TO TENDER FOR CONTACT WITH PETROLEUM COMMISSION

I Certify that as at.....**APRIL, 2017**..... This Establishment
(Date of Issue)

Employing.....**TWO (2) WORKERS**.....
has: (Number of Workers)

a. paid all Social Security Contributions (including penalties) up to :.....**APRIL, 2017**.....

b. submitted all Contribution Reports and fulfilled all other obligations under Act 766

c. made satisfactory arrangements to fulfill its obligations under Act 766
XX

I therefore issue this certificate which expires on:.....**TENTH DAY OF JULY YEAR TWO**.....
THOUSAND AND SEVENTEENTH (10/07/2017)

RAPHAEL JETHEY
BRANCH MANAGER
for: **DIRECTOR GENERAL**