

GILGAL ESTATE

SUBSCRIPTION FORM

Please complete all fields in BLOCK LETTERS

	CUSTOMER INFORMATION
	Preferred names for Land Document Preparation Proferred names for Land Document Preparation
	ONED (FIRST NAME)
	Marital Status Single Married V Others (Specify
	Name of Spouse HABIBAT DYEDLRAME)
1	CONTACT INFORMATION
	Mobile Number 080365111769 or
	Email Address KAYOYES 2013 @GMAIL COM
	Residential Address NO.03 10 17 18 19 19 19 19 19 19 19 19 19 19 19 19 19
	HOUSE GWIWA City/Town SOKOTO
	Local Govt. WAMAKICO State COKOTO
	Country of Residence NIGERIA Date of Birth 040288
	Mode of Identification Nat ID Driver Lic Int'l Passport Voters Card Others (Specify)
	ID Number A 0 5 8 5 2 2 7 4 RC No (For Company Id Only)
	Nationality NIGERIAN State Of Origin KWAKA
	Occupation ACCOUNTANT Employer's Name LVBSHAT.
	Employer's Address 013 DANJIRO AREA SO 1070
	NEXT OF KIN INFORMATION
	Name BUKOYE DYEDIKAN HARIBAT (FIRST NAME)
	Mobile Number 67038708289 08 0 5 0 9 1 9 6 11
	Residential Address NO-2 DAN 3+30 STAFF
	City/Town Cto KO 70
	TT Alumbor of Plots 4
	Plot of Land Options Residential Commercial Number of Plots Payment Options Outright Payment (discount Offer) Instalment Payment (12 Months Max.)
	March A Diagram of the Angle of
	at Elerangbe Ibeju-Lekki, is true and any false information provided by me may result in termination of my application. Date Date
	Signature
	Referred by OMUERIAUSIVIVIAM Date 23072019