

Received by me  
Alcintuyole Tilitope  
Atchon  
10-9-24



#### RETIREMENT PROCESSING SUBMISSION CHECK LIST

PEN

1 0 0 0 4 3 8 6 9 5 2 2

ITEM	RO/BD	BA
Letter of Approval / Acceptance of Retirement	✓	
Copy of Last 3 Months Payslips (stamped)	✓	
Birth Certificate/ Declaration of Age	✓	
Copy Retirement Bond slip From PenCom	✓	
Passport Photographs	✓	
Valid Means of Identification (Driver's license, National Identity card or International Passport)	✓	
Duly Completed NPF Pensions Withdrawal Form	✓	
Duly Completed Retiree Indemnity Form	✓	
Duly Completed Programmed Withdrawal Agreement Form	✓	
Duly Completed Standard Notice Of Retirement	✓	
Duly Completed Notice of Retirement (Public Sector)	✓	
Retiree CONTACT Details Update Form	✓	
Bank Details (one page statement or Bankers confirmation with Passport affixed)	✓	
Bank Name must conform with NAV otherwise name reconciliation to be provided		
<b>Processing/Approval(HO ONLY)</b>		
RSA Consolidation Status		
Confirm Retirement		
Confirm grade level and step		

\*All documents must be secured with file fasteners

\*All original document/s must be sighted by an officer or staff and photocopies must be stamped and certified "original document sighted by me: name, signature, designation& date

\*ALL documents to the Head office MUST be in duplicate

\* Customer update form must be filled by Retiree and details updated Regional customer care staff (where different from NAV)

ORIGINATING REGION

SW

STATE

Oyo

BA (NAME).....

IA&C (NAME).....

SIGN .....

SIGN.....



# POLICE SERVICE COMMISSION

8TH FLOOR, FEDERAL SECRETARIAT, PHASE 1, SHEHU SHAGARI WAY,  
ABUJA - NIGERIA

**PSC/2035/Vol. 1/1794**  
5<sup>th</sup> February, 2024

**AP. NO. 120791**

**OJO FEMI ADEDAYO, DSP**

U.f.s

The Inspector-General of Police  
The Nigeria Police,  
Force Headquarters,  
Louis Edet House,  
Shehu Shagari Way,  
Abuja.

## **RETIREMENT FROM THE NIGERIA POLICE FORCE**

Please refer to the Inspector-General of Police's letter Ref. No. SH: 0025/ESTAB/FS/FHQ/ABJ/Vol.1/424 dated 12<sup>th</sup> December, 2023 and your letter dated 14<sup>th</sup> November, 2023 on the above subject.

2. I am pleased to inform you that the Police Service Commission has approved your retirement from the service of the Nigeria Police Force with effect from 1<sup>st</sup> January, 2024 after thirty five (35) years of meritorious service.
3. Your dedication and service to the Nation is appreciated.
4. The Commission wishes you all the best in your future endeavors.

Original copy seen by me  
Akinwunmi Tiehlope

*[Signature]*

*[Signature]*  
**Ferdinand U. Ekpe**  
Director (Police Recruitment)

for: Permanent Secretary/Secretary to the Commission



FEDERAL GOVERNMENT OF NIGERIA  
THE NIGERIA POLICE

EMPLOYEE PAYSLIP

OCTOBER 2023

Employee Name:	OJO ADEDAYO	Grade:	GL10_CONPOSS
IPPIIS Number:	PF0239126	Step:	3
Legacy ID:	120791	Gender:	MALE
MDA/School/Command:	OYO STATE COMMAND	Tax State:	FGN
Department:		TIN:	
Location:		Date of Appointment:	01-JAN-1989
Job:	ASSISTANT SUPERINTENDENT OF POLICE	Date of Birth:	23-AUG-1969
Union Name:			

Bank Information Details

Bank Name:	NPF Microfinance Bank Limited	PFA Name:	NPF Pensions Limited
Account Number:	0020318036	Pension PIN:	PEN100043869522

Gross Earnings Information

Earnings	Amount
BASIC SALARY	₦ 150,120.42
NEW RENT ALLOWANCE	₦ 60,048.17
NEW SHIFT ALLOWANCE	₦ 18,014.42
NEW PECULIAR	₦ 30,024.08

Gross Deduction Information

Deductions	Amount
PENSION	₦ 12,009.63
NPF COOP	₦ 1,000.00
NPWIS INSURANCE	₦ 1,000.00
NHF	₦ 3,753.01
NPF VOLUNTARY COOP	₦ 20,000.00

Original Copy Seen by me  
Atentuoye Titlope  
*[Signature]*

Summary of Payments

Total Gross Earnings:	₦258,207.09
Income Tax	₦27,025.30
Total Gross Deductions:	₦64,787.94



Total Net Earnings:

N193,419.15

CONFIDENTIAL



# FEDERAL GOVERNMENT OF NIGERIA

## THE NIGERIA POLICE

### EMPLOYEE PAYSHEET

NOVEMBER 2023

Employee Name:	OJO ADEDAYO	Grade:	GL10_CONPOSS
IPPIIS Number:	PF0239126	Step:	3
Legacy ID:	120791	Gender:	MALE
MDA/School/Command:	OYO STATE COMMAND	Tax State:	FGN
Department:		TIN:	
Location:		Date of Appointment:	01-JAN-1989
Job:	ASSISTANT SUPERINTENDENT OF POLICE	Date of Birth:	23-AUG-1969
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Original copy seen by me

Akintayoye Titilope

Atten

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CONFIDENTIAL



## FEDERAL GOVERNMENT OF NIGERIA THE NIGERIA POLICE

### EMPLOYEE PAYSLIP

DECEMBER 2023

Employee Name:	OJO ADEDAYO	Grade:	GL10_CONPOSS
IPPIIS Number:	PF0239126	Step:	3
Legacy ID:	120791	Gender:	MALE
MDA/School/Command:	OYO STATE COMMAND	Tax State:	FGN
Department:		TIN:	
Location:		Date of Appointment:	01-JAN-1989
Job:	ASSISTANT SUPERINTENDENT OF POLICE	Date of Birth:	23-AUG-1969
Union Name:			

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Original Copy Seen by me

Aminu Oye Titilope

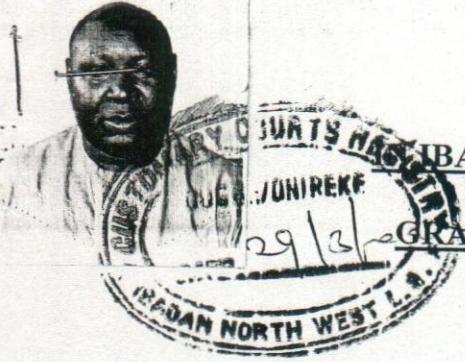
*[Signature]*



Total Net Earnings:

₦193,419.15

CONFIDENTIAL



IBADAN NORTH WEST LOCAL GOVERNMENT

GRADE 'C' CUSTOMARY COURT HOLDEN AT

IBADAN-OYO STATE.

SWORN AFFIDAVIT OF AGE DECLARATION

I, MR. MOSES ADENIYI OJO 'M', Christian Nigeria Citizen of ILE ELEPE ISEKE Oyo State, do hereby make an Oaths and declare as follows:-

1. That I am the declarant herein.
2. That ADEDAYO OJO is My SON.
3. That ADEDAYO OJO was Born on 23<sup>RD</sup> AUGUST, 1968 in ELEPE ISEKE Oyo State.
4. That during the time of his birth I was not aware of any birth could not be registered but recorded in the family book record.
5. That I Swear this affidavit for record/official and future purpose.
6. That I swear this in good faith, believing same to be true and Correct in accordance with statutory declaration law of Oyo State 2000.

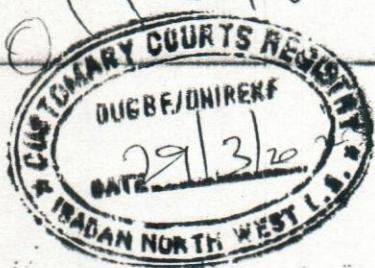
*MWSL*

DECLARANT

SWORN TO AT IBNWLG GRADE  
'C' CUSTOMARY COURT HOLDEN  
AT IBADAN TODAY *29*.....MARCH, 2023.

BEFORE ME:-

*F*  
COMMISSIONER FOR OATHS



Original copy seen by me

Akintayoje Tithope

*Akintayoje Tithope*



## NATIONAL PENSION COMMISSION

### RETIREMENT BENEFIT ENROLMENT SLIP

RSA PIN : PEN100043869522

PFA 047 NPF Pension Fund Managers

#### PERSONAL INFORMATION

FULL NAME FEMI ADEDAYO OJO  
GENDER M  
DATE OF BIRTH 23-Aug-1968  
DATE OF FIRST APPOINTMENT 01-Jan-1989  
DATE OF RETIREMENT 01-Jan-2024



#### EMPLOYMENT INFORMATION

YEAR	SAL STRUCTURE	GL	STEP	EMPLOYER NAME
2004	HAPOSS	4	7	Police Formation & Commands
2007	CONPOSS	5	10	Police Formation & Commands
2010	CONPOSSII	5	10	Police Formation & Commands
2013	CONPOSSII	7	3	Police Formation & Commands
2016	CONPOSSII	7	6	Police Formation & Commands
2019	CONPOSSII	9	1	Police Formation & Commands
2024	CONPOSSII	10	4	Police Formation & Commands

RETIREMENT MODE: STATUTORY

REGISTRATION STATUS: Successful Verification

#### REGISTRATION INFORMATION

Registration Date : 08-Mar-2024

Registration Officer Name &

TAKINTUJOYE-

Retiree Signature

Original copy seen by me  
Takintujoye Tibilope  
Rugen

Attn 18/3/2024

Amr 8/3/2024



# National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)



Tracking ID:	S7Y0OG2WC00052S	Surname:	OJO	Address:	
NIN:	26268445782	First Name:	FEMI	131 ZONE 6 IFESOWAPO NEW AIRPORT ROAD YIDI GANGANSHI	
Middle Name: ADEDAYO		IBADAN OY			
Gender: M					

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 Dalaba Street, Zone 5 Wuse, Abuja Nigeria
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Original copy seen by me

Akintayoje Tarihope

Akintayoje



NPF PENSIONS LIMITED  
Ref. 1147206



### RSA HOLDER DETAILS

Title (Mr/Mrs/Miss)

MR

OJO

Lastname

FEMI

Firstname

ADEDATO

Middlename

Residential address

NO 131 ZONE 6 IFFESOWAPO GANGANSI NEW AIRPORT  
 RD. 1B.

Gender

M

Date of Birth

23-08-1968

Mobile Number 1

08033333333

Mobile Number 2

08033333333

E-mail

Employer Name

NIGERIA POLICE FORCE

Employer Address

LOUIS EDSET HOUSE AREA II GARKI ABUJA

### NOK DETAILS

Title (Mr/Mrs/Miss)

MRS

OJO

Lastname

ADEDATOJIN

Firstname

TEMITOPÉ

Middlename

Residential address

NO 131 ZONE 6 IFFESOWAPO GANGANSI NEW AIRPORT  
 RD. 1B.

Gender

F

Date of Birth

23-10-1992

Mobile Number 1

07080409503 09052423186

Mobile Number 2

E-mail

Relationship

DAUGHTER

### Benefit Options

- LUMSUM
- PROGRAMME WITHDRAWAL
- ANNUITY
- ADDITIONAL VOLUNTARY CONTRIBUTION (AVC)
- 25% LUMSUM OR ENBLOC

- RETIREMENT (compulsory/voluntary)
- TERMINATION/RESIGNATION
- MEDICAL GROUP

Date of Retirement

01-01-2024

DD/MM/YYYY

RECEIVING BANK

POLARIS

ACCOUNT NUMBER (NUBAN)

1761243579

OJO FEMI

TAX NUMBER (AVC ONLY)

001180048

SORT CODE

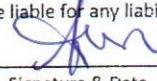
BASIC

TRANSPORT

HOUSING

CONSOLIDATED SALARY (if any)

Declare that the information provided above is to the best of my knowledge true and accurate and I hereby agree to be liable for any liability resulting from the information given.

  
Signature & Date

Illiterate jurat certificate and thumb print is required if unable to

### For Official use only

Customer Service Officer

Branch Service Centre

Signature & Date

Phone Number

### CUSTOMER'S SLIP

PEN

RSA PIN

Customer Name

CSO'S NAME

CSO's phone number

Submission Date



## NATIONAL PENSION COMMISSION

### RETIREE INDEMNITY FORM

THIS IS TO CERTIFY THAT I, OYO FEMI ADEDAYO,  
of NO 131 ZONE 6 IFFEWARD GANGANSI NEW AIRPORT RD 1B.  
with PIN Number PEN100043869522  
having retired from the service of NIGERIA POLICE FORCE  
with effect from the 1st day of JANUARY 2024.

#### DO SOLEMNLY DECLARE as follows:

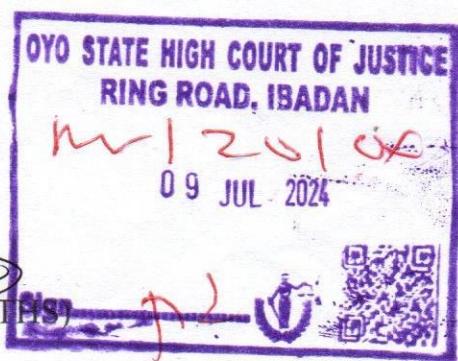
1. That I fall under the Contributory Pension Scheme established by the Pension Reform Act, 2004.
2. That I have not at any time prior to or after retirement collected any retirement benefit, including gratuity and/or pension from any institution, organization or person.
3. That I shall indemnify any institution, organization or person from whom any benefit had been so derived either by omission or commission and/or in any way prejudicial to any regulations, guidelines or directives of the National Pension Commission or the Pension Reform Act, 2004.

.....  
DEPONENT

Sworn at the High Court

This 9th day of July, 2024

BEFORE ME  
  
(COMMISSIONER FOR OATHS)





PENSIONS LIMITED  
R.C. 1147206

## PROGRAMMED WITHDRAWAL AGREEMENT

This Programmed Withdrawal Agreement is made this 26 day of Sep 2024, BETWEEN Mr./Mrs. DJO. FEMI ADEBATO of No. 131 ZONE 6, IFESOWA DO, GANGANSI NEW AIRPORT RD 1B (hereinafter referred to as "the Retiree", which expression shall where the context so admits include his/her successors) of the First Part AND NPF PENSIONS LIMITED PFA a Company incorporated under the Laws of the Federal Republic of Nigeria and duly licensed by the National Pension Commission (hereinafter referred to as "the Commission") to carry on the business of a Pension Fund Administrator, having its registered office at Behind Louis Edet house central Area Abuja, (hereinafter referred to as "the Administrator" which expression shall where the contexts so admits include its successor in title and assigns) of the Second Part.

### WHEREAS:

- a) By virtue of the provisions of the Pension Reform Act 2004 (PRA 2004), a holder of a Retirement Savings Account (RSA) may, upon retirement or attaining the age of 50 years, whichever is later, amongst other things utilize the balance standing to the credit of his/her RSA for the benefit of a programmed monthly or quarterly withdrawal;
- b) The Retiree is a holder of an RSA with PIN No. 100043869522 maintained with NPF PENSIONS LTD PFA, was under the employment of NIGERIA POLICE FORCE Company Limited of FEDERAL REPUBLIC OF NIGERIA and in line with the provisions of the PRA 2004, is desirous of utilizing the full or part of the balance standing to the credit of his/her RSA by way of a Programmed Withdrawal in accordance with the terms of this Agreement;
- c) The Administrator is desirous of rendering to the Retiree, the said Programmed Withdrawal Services in accordance with the terms and conditions of this Agreement;
- d) The parties hereby agree to be governed by the provisions of the PRA 2004, Guidelines, Rules and Regulations issued by the Commission from time to time;

- e) This Agreement sets out hereunder the duties, rights and obligations of the parties.

IT IS HEREBY AGREED as follows:

### **ARTICLE I APPOINTMENT**

- 1.1 The Retiree hereby appoints the Administrator as his administrator for the provision of Programmed Withdrawal Services during his retirement for life.
- 1.2 For the purposes of giving effect to Article 1.1 above, the Administrator shall continue to manage the pension fund standing to the credit of the Retiree's RSA until demise or termination of this Agreement, whichever is earlier.

### **ARTICLE II DUTIES AND RESPONSIBILITIES OF THE RETIREE**

- 2.1 The Retiree shall state in writing his/her intention or otherwise to make a lump-sum withdrawal prior to the commencement of a Programmed Withdrawal.
- 2.2 The Retiree shall furnish to the Administrator, his/her last pay-slip or evidence of last salary.
- 2.3 The Retiree shall furnish the Administrator with his/her bank account number and relevant details to facilitate the monthly or quarterly payment.
- 2.4 The Retiree shall update the Administrator with any change in the particulars of his/her next of kin.
- 2.5 The Retiree shall regularly monitor the activities of the Administrator to ensure strict compliance with the provisions of this Agreement.
- 2.6 The Retiree shall keep evidence of all receipts and records of the transactions on the scheme for monitoring and related purposes.

### **ARTICLE III DUTIES AND RESPONSIBILITIES OF THE ADMINISTRATOR**

- 3.1 The Administrator shall calculate and inform the Retiree, the amount to be taken by him/her as monthly or quarterly Programmed withdrawal on the basis of an expected life span and in accordance with the model approved by the Commission.

- 3.2 The Administrator shall, immediately upon the commencement of this Agreement, issue the necessary instruction to its Pension Funds Custodian (the Custodian) for carrying out the necessary monthly or quarterly payments of the agreed sum into the Retiree's bank account.
- 3.3 The Administrator shall ensure that the Retiree's Bank Account is credited with the periodic amount on the 24<sup>th</sup> day of every calendar month or the next working day, whichever is earlier.
- 3.4 The Administrator shall continue to invest the balance standing to the credit of the Retiree's RSA in instruments approved by the Commission and from time to time credit the RSA with any accrued income from such investments.
- 3.5 The Administrator shall issue the Retiree with quarterly statements of activities balances and other transactions on his/her RSA.
- 3.6 The Administrator shall continue to update the Retiree's records as may from time to time become necessary.
- 3.7 The Administrator shall provide a help desk to attend to enquiries and/or queries from the Retiree.
- 3.8 The Administrator shall ensure prompt payment of both lump sum and periodic withdrawal from his/her pension fund.

#### **ARTICLE IV GOOD FAITH**

- 4.1 The Administrator shall in all matters act in good faith, exercise due diligence and highest professional conduct and judgment in the discharge of its responsibilities under this Agreement, the Pension reform Act 2004 and Guidelines, Rules and Regulations of the Commission.
- 4.2 The Administrator undertakes to use its best endeavour to promote the success of this scheme and not to do or refuse to do anything, the result of which may delay or otherwise frustrate the remittance of the periodic amount payable under this Agreement as and when due.

#### **ARTICLE V ASSIGNMENT**

- 5.1 The Parties shall not assign any of their respective obligations in this Agreement without the consent of the other party and a subsequent approval of the Commission.

## **ARTICLE VI SERVICE FEES**

- 6.1 The Administrator shall charge reasonable fees for services rendered in line with the Regulations on Fees Structure approved by the Commission.

## **ARTICLE VII ACTS OF BREACH**

- 7.1 The following shall constitute acts of breach of this Agreement:-
- 7.1.1 Delay or failure to facilitate the crediting of the Retirees bank account in lines with Article 3.3 of this Agreement.
  - 7.1.2 Any misrepresentation or failure to submit any vital information by one party to the other party.
  - 7.1.3 Assignment of the rights, interests and benefits by either party without due consents or approvals in line with Article 5.1 of this Agreement.
  - 7.1.4 Any surcharge or other charges not in line with the Regulations on Fees Structure issued by the Commission.
  - 7.1.5 Failure to meet any of the obligations and responsibilities under this Agreement.
  - 7.1.6 Commit any other acts of omission capable of undermining the efficient and effective operation of the scheme.
- 7.2 Nothing contained herein shall require the Administrator to take any action or refrain from taking any action which will cause it to violate any Law of the Federal Republic of Nigeria.

## **ARTICLE VIII PENALTIES**

- 8.1 In the event of any shortfall or delay in making periodic payment into the Bank Account of the Retiree, the Administrator shall, as the case may be, refund the amount that has fallen short and/or pay interest at the prevailing NIBOR rate for every day that the delay in payment persists.
- 8.2 The penalty in Article 8.1 shall be without prejudice to any other penalty that may be imposed by the Commission for any or all acts of breach under this Agreement.

## **ARTICLE IX DISPUTE RESOLUTION**

- 9.1 In the Event of any dispute arising directly or indirectly from this Agreement, such dispute shall in the first instance be referred to the Commission for informal mediation and conciliation.
- 9.2 Where either party is dissatisfied with the decision of the Commission Article 9.1 above such party may refer the matter to arbitration in accordance with the Arbitration and Conciliation Act or to the Investment and Securities Tribunal in accordance with the Pension Reform Act.
- 9.3 Nothing contained in this Agreement shall denigrate a cause of action by the Retiree against the Administrator to enforce the rights arising from this Agreement.

## **ARTICLE X COMMENCEMENT**

- 10.1 This Agreement shall take effect on the date of execution or any such time as the Retiree may on his own volition elect for the commencement of the Programmed Withdrawal.

## **ARTICLE XI AMENDMENTS**

- 11.1 This Agreement duly executed may be modified or amended only with the written agreement of all the parties and subject to the approval of the Commission.

## **ARTICLE XII.. TERMINATION**

- 12.1 The Retiree may by written notice terminate this agreement or suspend performance of all or any of the obligations under it immediately and without liability for compensation or damages if:
  - a) Any remittance by the Administrator under this Agreement is not effected on the due date provided that such failure or delay is not due to any event of force majeure.
  - b) The Administrator breaches its obligation under this Agreement or any agreement supplemental to it, and the breach if capable of being remedied, remains un-remedied for seven (7) days after being to its attention by written notice.
  - c) The Administrator fails or ceases to perform the duties under this Agreement.
  - d) The Administrator ceases to hold a license issued by the Commission to operate as a PFA.

## ARTICLE XIII FORCE MAJEURE

- 13.1 If either party is prevented from or delayed in performing any of its obligations under this agreement by reason of force majeure, such as but not limited to Acts of God, war, revolution or other physical disaster, or other causes which are beyond the reasonable control of the party affected and which, by exercise of reasonable care and diligence it was unable to prevent and such party without delay notifies in writing the other party, the delay or failure of performance will not give rise to any claim for damages against the other party.

## ARTICLE XIV NOTICES

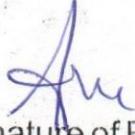
- 14.1 Any notice given under this agreement shall be in writing and may be served personally or by registered post or recorded delivery mail or by other means which either party specifies by notice to the other.
- 14.2 The Address for service of the notice shall be the address as appearing in this Agreement.

**IN WITNESS WHEREOF** the parties have set their hands and Common Seal to be hereunto affixed the day and year first above written

**SIGNED SEALED AND DELIVERED**

**BY THE WITHIN NAMED RETIREE**

DJO FEMI ADEDATO



(Signature of Retiree)

In the presence of

Name: BALOGUN SARAT

Address: POLICE HEADQUARTERS IBADAN

Occupation: CIVIL SERVANT

Signature: 

**THE COMMON SEAL OF THE WITHIN NAMED ADMINISTRATOR  
WAS HERETO AFFIXED** in the presence of

DIRECTOR

SECRETARY



### STANDARD NOTICE OF RETIREMENT

#### 1. Account Holder's Particulars:

OJO

Surname

FIEMAI

First Name

ADEDATO

Middle Name

100043869522

PIN

03-08-1968

Date of Birth  
(dd/mm/yy)

Sex (M/F)

01-01-2024

Effective Date of Retirement  
(dd/mm/yy)

Marital Status (M/S/D/W)

Permanent Home Address:

NO 131 ZONE 6 IFESENWAPO GANGANSI NEW  
 AIRPORT RD 1B.

Current Contact/  
Mailing Address:

House Tel. Number

Mobile Tel Number

08055126855

#### 2. Current Employment Details:

Employer's Name  
and Address

NIGERIA POLICE FORCE  
 LEWIS ENDET HOUSE AREA 11 GARKI ABUJA

Employer Code

Total Annual Remuneration ₦

(Attach Pay Slip)

#### 3. Details of Benefits:

Accumulated Contributions to Date: ₦

Status of Retirement Bond ₦  
(If a public sector employee)

Expected Contribution to Date of Retirement ₦

Status of Accrued benefits ₦  
(if a private sector employee)

#### 4. Reasons for Retirement/Exit (Please tick appropriately)

Normal Retirement Medical Terms and Condition of Employment 

##### a.) If on Medical Reasons:

Medical Condition: .....

Name and Address of Physician/Hospital that issued the medical certificate: .....

Date of Medical Certification

(dd/mm/yy)

b.) **If under Terms and Conditions Of Employment:**

State Unique Terms and Conditions of employment:

PFA Code:

**Certification by PFA:**

Authorised Signatory

Official Stamp

Name: Arcen tuyope Tiblope Designation: CSO Date: 10-9-24

**DOCUMENTS TO BE ATTACHED:**

- (i) Official Notice of employment from employer.
- (ii) Last pay-slip.
- (iii) Any other evidence of total annual remuneration (specify).
- (iv) CTC or Retirement Bond Certificate (for employees in public sector).
- (v) Medical Certificates (where retirement/exit is on medical grounds).
- (vi) Letter of notification of retirement by employer authenticating medical certificate.
- (vii) Letter confirming that temporary exit is in accordance with terms of employment.

DOCUMENTS TO BE ATTACHED:  
(i) Official Notice of employ



NPF PENSIONS LIMITED  
Reg. No. 1147206

### NOTICE OF RETIREMENT FORM (PUBLIC SECTOR)

PERSONAL DETAILS	
Name	OSO FEMI ADESAIO
Retirement Date	1ST JANUARY 2024
PIN No (12 digits)	PEN 100043869522
Mobile Phone No	08055126855
Email Address	
Residential Address	NO 131 ZONE 6IFE SOWAPD GANGANSI NEW AIRPORT RD 1B.
Contact/Postal Address	
BANK DETAILS	
Valid Account Number	1761243579
Sort Code	001180048
Bank Name	POLARIS BANK
Bank Branch (where a/c was opened)	

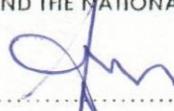
Your Preferred Withdrawal Option From RSA	
Lump Sum With	<input checked="" type="checkbox"/>
Monthly withdrawal	<input checked="" type="checkbox"/>
Quarterly Withdrawal	

(Please tick the appropriate boxes)

**Kindly attach copies of the following documents to the form and return as soon as possible.**

- Retirement letter from employer
- Last Three(3) Months' Pay Slip
- Two passport photographs
- Bank confirmation of account (Please include the sort code)
- National Pension Commission Registration Slip
- Age Declaration
- Means of Identification (National I.D./Driver's License or International Passport)
- Indemnity form
- Duly completed programmed withdrawal agreement form

PLEASE ENSURE THAT YOU ATTEND THE NATIONAL PENSION COMMISSION VERIFICATION EXERCISE (PUBLIC SECTOR EMPLOYEES).

Retiree's signature: ..... 

Date: 9-9-24



## NPF PENSIONS LIMITED CUSTOMER INFORMATION UPDATE FORM

In our bid to serve you better, kindly avail us with the following information.

### Instructions:

- All fields are mandatory
- Addresses must be precise and accurate
- Mobile phone numbers are preferred. Do not use office lines.

RSA PIN/PEN: 100043869522

AP/Force No.: 120791

Rank: DSP

Date of Birth: 23/08/1968

First Name: FEMI

Middle Name: ADEDATO

Surname: OJO

NIN: 26268445782

IPNIS No: PF 0239126

Grade Level/Step: \_\_\_\_\_

Date of First App/Enlistment: 01/01/1989

Date of Confirmation: 01/01/2024

Phone No: 08055126855

Alt. Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

State of Posting: OYO

Division/Outpost: DFA

Current Office Address: POLICE HEAD QUARTERS ELEYELA  
IBADAN

Current Home/Residential Address: NO 131, ZONE 6, IFESOWAPPO  
GANGANSI NEW AIRPORT RD 1B

### AUTHORISATION

I hereby certify that the information provided in this form is correct. I further consent and authorize the National Identity Management Commission to release my NIN information (as may be required) to the National Pension Commission (PenCom), upon request by NPF Pensions Limited and/or its approved Agents for the maintenance and operation of my Retirement Savings Account. It is my understanding that PenCom will ensure that due care is exercised to secure and protect my personal information.

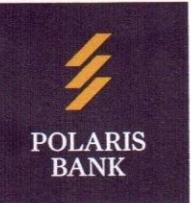
Name (in full): OJO FEMI ADEDATO

Signature: [Signature]

Date: 9-9-24

**Polaris Bank Limited**

3, Akin Adesola Street,  
Victoria Island, Lagos, Nigeria  
Tel: +234-01-2701600, 2627598  
e-mail: info@polarisbanklimited.com  
www.polarisbanklimited.com



RC 1525101

4<sup>TH</sup> September, 2024

**The Managing Director/CEO**  
**NPF Pension Limited**  
**Plot 3820 R.B Dikko Road**  
**Central Business District**  
**Abuja**

Dear sir/ma

**CONFIRMATION OF SIGNATURE: FEMI ADEDAYO OJO**  
**ACCOUNT NUMBER: 1761243579**



The above refers.

We hereby confirm that the signatories appearing below are the true specimen signature on the mandate card of **FEMI ADEDAYO OJO**

The signatories to the account – Signs below:

**FEMI ADEDAYO OJO:**

A handwritten signature in blue ink, appearing to read "Femi Adedayo Ojo".

**Type of Account:** Standard Current - Individual (NGN)

**Date Opened:** 27th February, 2008

Thank you for your cooperation.

Yours faithfully,

**For: POLARIS BANK LIMITED**

A handwritten signature in blue ink, appearing to read "Osayuwamen Adagbasa".

**OSAYUWAMEN ADAGBASA**  
**B1030**

A handwritten signature in blue ink, appearing to read "Omowumi Odunlaade".

**OMOWUMI ODUNLAADE**  
**A394**

**Directors:**

Muhammad K. Ahmad, OON (Chairman), Adekunle Sonola (Managing Director/CEO), Chinwe Illoghalu (ED), Martins Izuogbe (ED), Abubakar D. Suleiman, Salma Mohammed, Adeleke Alex-Adedipe, Ahmed Almustapha (OFR), Francesco Cuzzocrea, Olabisi O. Odunwo, Aku P. Odinkemelu (Non-Executive Directors).