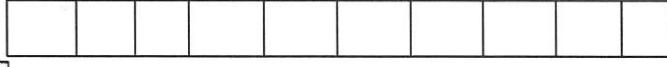
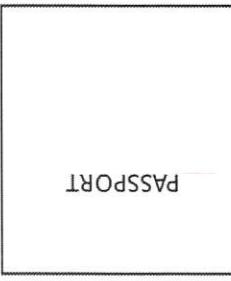


1

CUSTOMERS' ADDRESSES:	
Permanent Address (Full Physical Address): NWOKOMA'S COMPOUND IBEKUWA 1-WATAKBO MBASE LGA IMO STATE	
Relationship: Spouse Address: same	
Name of Next of Kin: OGUCHIKA NWOKOMA DOB 09/02/1990	
Nationality: NIGERIAN State: IMO LGA: ABCH MBASE	
Purpose of Account	
Bank Verification Number (BVN): 22234115327	
Category of Account Current: <input checked="" type="checkbox"/> Savings: <input type="checkbox"/>	
NIN (Mandator): 41049199041	
Means of Identification	
Phone No: 07067973091	
Date: 08/12/2025 Signature: 	
Employer name & address: INSTITUTE OF HUMAN RESOURCE, NIGERIA, JAS MBUSI	
Residential address: PLOT 820 IEGUN STATE MARSHAL ABUJA	
D.O.B. 04/10/1986 Marital status MARRIED Sex: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	
First Name: ANTHONY Middle Name: SURNAME: NWOKOMA	
Account Number: 	
PASSPORT 	

ACCOUNT OPENING FORM

No. 1, Bishop Street, Jimeta-Volta, Adamawa State, Nigeria
RC. 7167143

ADAMAWA MORTGAGE BANK LIMITED



2

Applicant Signature

I hereby apply for the opening of an account with ADDAMAWA MORTGAGE BANK LTD. I understand that the information given herein and the supplied documents are the basis for opening such account and I therefore warrant such information is correct.

DateofExpiraton : _____

ResidentPermNo .: _____ I.D CardNo.: _____ DateofIssue : _____

PermitExpiratonDate : _____ Meansof I.D _____ PermitIssueDate : _____

ResidentPermNo .: _____ If YES, PLEASE GIVE DETAIL S: _____

IPPSNO.: _____ PoliticallyExposedPersons (PEP):YES/NO

Bankname: _____ ACC.NO.: _____ Sourceoffunds: SALARY

TypeofAccount: _____ PurposeofAccount: _____

ACCOUNT DETAILS:

OfficeID No.: q55 OfficeContactPerson: BRIGHT ISRAEL

TelephoneofEmployer: SENIOR PROGRAM OFFICER AddressofEmployer: JAMB ABUJA

NameofEmployer: INSTITUTE OF HUMAN RESOURCE MANAGEMENT Occupation: Software ENGINEER NatureofJob/business: PUBLIC HEALTH

EMPLOYMENT DETAILS:

NameofSpouse Employee: _____

OccupationofSpouse: Self-employed Position: CEO

AgeofChildren: 7, 9, 4, 2 Telephone: 0806355085 NoofChildren: 4

ResidentialAddress (if different from customer's): _____

DateofBirth: 09 FEB 1990

NameofSpouse: OGOCHUKWU MIRIAM NWOKOCHA

SPOUSED DETAILS:

NameofBank/Situationstaff: _____ Signature _____ Date: _____

NumberofYearsinResidence: _____ NameofLandlord: _____

TypeofBuilding: _____ Colour ofBuilding: _____

NearestBusstop: VIO MANSI Landmark: VIO MANSI

ResidentialAddress: LOT 820 ESTATE MARSHAL ABUJA

TypeofBuilding: _____ ColourofBuilding: _____

NearestBusstop: ST PATRICK IBECI Landmark: _____

Approval Officer: _____ Sign & Date _____

Account Opening Officer: _____ Sign & Date _____

For Official Use Only

- Referees account must not be less than six months' old
- Referees must be account holder in any of the commercial banks in Nigeria
- It is dangerous to introduce a person who is not well known to you

Please Note:

--	--	--	--	--	--	--	--	--	--

Account Number: _____

Bank Address: _____

Bank Name: _____

Address: _____ Signature: _____

Name of Referee: _____

Comment on the Applicants suitability for maintaining Current Account:

I wish to confirm that I have known the above name person for _____ years.

Applicant Name: ANTHONY NWOKOMA**REFEE 2**

--	--	--	--	--	--	--	--	--	--

Account Number: _____

Bank Address: _____

Bank Name: _____

Address: _____ Signature: _____

Name of Referee: _____

Comment on the Applicants suitability for maintaining Current Account:

I wish to confirm that I have known the above name person for _____ years.

Applicant Name: ANTHONY NWOKOMA**REFEE 1**

1. Name of Applicant (RSA holder): **ANTHONY NWOKOMA**

2. PFA: _____

3. PEN: _____

4. Name of Mortgage Lender: _____

5. Address: _____

6. Type and Address of Property: _____

7. Type of Mortgage Offer (single or joint): _____

8. Evidence of marriage: _____

9. PIN of spouse (if in a joint mortgage): _____

10. PFA of spouse (if a joint mortgage): _____

11. Amount of Equity payable by each applicant (if a joint mortgage): _____

12. Mortgage Account Number: _____

13. Value of Property: _____

14. Amount of Equity payable: _____

15. Date of Birth: **04 OCTOBER 1986**

16. Sex: **MALE**

17. Marital Status: **MARRIED**

PFA DETAILS**25% RSA EQUITY FUND APPLICATION FORM**

No. 1, Bishop Street, Jimeta-Yola, Adamawa State, Nigeria

ADAMAWA MORTGAGE BANK LTD
Affordable shelter for all

RC No. 7167143

31. NIN: 41049199041

30. BVN: 222 341 15327

29. Source of income:

28. Monthly salary/income:

27. Repayment period:

26. Amount of Loan Required (in Words/Figures):

25. Purpose of Loan Required:

24. Mortgage Lender (loan option as supplementary fund):

23. Telephone No: 070 639 33891

22. Present Position SENIOR PROGRAM OFFICER

21. Office Address: IFC CLOUD CENTER 2nd FLOOR, PLAT 62, NEAR PLOT NO 10, AURANGABAD

20. Date Employed: JANUARY 20, 2023

19. Occupation: SOFTWARE ENGINEER

18. Residential Address: LOT 842 JEGUU STATE MARIASHI NOT IT

OTHER DETAILS

Owner - Occupier? _____ or Rented ENTED

Date

Signature

I, Mr./Mrs./Chief/Hon./
hereby
declare that the above information is true and correct and shall comply with any other terms
and conditions as stipulated by the bank as requirement for my RSA processing.

DECLARATION

44. GSM Number: 080 6353508543. Address of place of work: Same42. Occupation: SELLER41. Relationship: WIFE40. Address: Same AS MINE39. Name: OGOCHUKWU NWOKEOMA MIRIAM

NEXT OF KIN BIODATA

38. GSM Number: 080 63535085

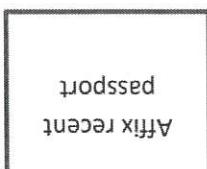
37. Date of Employment (public servant):

36. Present Rank: CUSTodian35. Address of place of work: MABUSIJI ULITAREMIREN MARKET, ABIA34. Occupation: SELLER33. Address: Same32. Name: OGOCHUKWU MIRIAM NWOKEOMA

SPOUSE BIODATA

Name of Applicant	ANTHONY NWOKO
PIN (12 digits)	110024237612
Phone No/email address	09063993091 / anthonynwokoma1@gmail.com
Date of Birth	04/10/1986
Current Residential Address	PLOT 820 JEGUNWE ESTATE MIRRORS/ATUJA INSTITUTE OF PUBLIC WORKS, ATUJA
Employer Name	ANTHONY NWOKO
Date of Employment	20th JANUARY, 2020
Type of Mortgage	Single <input checked="" type="checkbox"/> Joint <input type="checkbox"/>
Name of Primary Mortgagee	Leender
Address of Mortgagee	Address of property
Type of Property e.g (1/2/3 bedroom, Bungalow, Semi-detached or detached)	Total Value of property(N)
Total RSA Balance @ date of application for statement	Equity amount required(N)
Equity amount (equivalent amount less than 25% of RSA balance)	Supplementary amount paid(if applicable)(N)
Bank Account Details With Mortgagor lender Account name	Bank Account Details With Spouse PIN
Bank name	Spouse Name
Please fill this part for joint application only	Equity amount payable by partner

RESIDENTIAL MORTGAGE EQUITY CONTRIBUTION APPLICATION FORM



For FCMB Internal Use ONLY (To be completed by the receiving officer)	
Applicant has accessed 25% job loss YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
Applicant has VC <input type="checkbox"/> NSIF <input type="checkbox"/> Pre-Scheme <input type="checkbox"/> Not applicable <input type="checkbox"/>	
Please confirm documentation is complete (Required fields Must be filled) <input type="checkbox"/>	
Confirmed by: Staff Name Signature/Date	
Branch/Location:	

Applicant's Signature Date ES/12/2025

- i. Written Application
- ii. Mortgage offer letter
- iii. Evidence of supplementary payment (for applicants with 25% RSA balance below the required equity contribution)
- iv. Valid means of ID (NIN slip, Driver's license, International passport)
- v. Birth certificate/declaration of age
- vi. RSA holder indemnity form
- vii. First letter of employment (Public Sector)/Letter of introduction by Employer stating retirement date (Private Sector)
- viii. Consent form (Appendix 2) consent to pay for Equity Contribution towards Residential Mortgage from RSA
- ix. Insurance Policy document (to be provided by the Mortgage Lender)
- x. Valuation report (to be provided by the Mortgage Lender)
- xi. Property title document (to be provided by the Mortgage Lender)

Please ensure you have completed Data Recapture - This is mandatory

Kindly attach copies of the following documents to the form. Only complete documents would be accepted for processing.

- Do you have any of the following: (Tick appropriate box)
- Have you accessed 25% of RSA for loss of job? YES NO
- Voluntary Contribution NSIF Pre-Scheme contribution
- Please state if you want to utilize any of the contributions as part of the 25% RSA equity contribution. Yes NO

Page 1 of 1

SIGNATURE: 

PHONE NO: 0766993091

PIN: 110024237612

NAME: ANTHONY NWOKOMA

Yours faithfully,

Thank you for your co-operation.

VC Contribution NSITF Pre-Scheme Contribution

to include any of the above options.

I have also been informed of the options to include my Voluntary Contributions contribution, NSITF and Pre-Scheme Contribution to augment the equity contribution to the Mortgage Lender. Tick the box(es) below if you want to instruct me to pay the 25% equity contribution to the Mortgage Lender. Tick the box(es) below if you want

difference with the Mortgage Lender before the release of 25% of my RSA balance by my PFA. Of the RSA is lower than the equity contribution required by the Mortgage Lender, I shall deposit the equivalent to the equity contribution required by the Mortgage Lender. Conversely, where the value of 25% is higher than the equity contribution required by the Mortgage Lender, I shall only access an amount equivalent to the equity contribution required by the Mortgage Lender. However, where the value of 25% of my RSA balance equity contribution required by the Mortgage Lender, I trespassive of the percentage of submission of my request, as equity contribution for residential mortgage, trespassive as at the date of Notwithstanding the above, I hereby authorize FPA to pay 25% of my RSA balance as at the date of

Swings Account balance towards payment of Equity Contribution for Residential Mortgage by RSA Holders. Furthermore, I consent that application of a percentage of my RSA balance for equity contribution for Residential Mortgage shall be once, in line with the clause 3.4 of the Guidelines on Accessing the Residential RSA

I do hereby declare that I had been properly enlightened of the impact of accessing equity contribution for Residential Mortgage on my Retirement Savings Account (RSA) Balance.

Tick if this is a Joint Application.

Tick if you had accessed RSA due to Temporary loss of Employment.

CONSENT TO PAY FOR EQUITY CONTRIBUTION TOWARDS RESIDENTIAL MORTGAGE FROM MY RSA

Dear Sir,

The Managing Director
FCMB Pensions Limited
Plot 207 Zakaia Malimbari Street
Cadastral Zone AO CBD
Abuja.

Confidential

Milburn Anthony
Flat 820 Regent Estate



Appendix 2

1. FCMB Pensions Limited (PFA) is a Pension Fund Administrator duly licensed by the National Pension Commission ("The Commission") to manage Retirement Savings Accounts (RSAs) in accordance with the provisions of the Pension Reform Act 2014 ("the Act").

2. The Commission has, pursuant to the Act, issued Guidelines on Accessing RSA towards Payment of Equity Contributions for Residential Mortgage ("Guidelines"), which Guidelines permits an RSA holder to request for acquisition of a portion of his/her RSA balance as equity contribution towards repurchase of a residential property mortgage loan from a licensed financial institution.

3. The indemnitor is a holder RSA with PEN 11002-4237612 and meets the eligibility criteria for the provision of receiving mortgage services under the Guidelines issued by the Commission.

4. The RSA holder has undertaken to make equity contributions to facilitate his mortgage and has applied to FCMB Pensions Limited (PFA) to release to the indemnitor his/her application for a residential mortgage.

5. FCMB Pensions Limited (PFA) agrees to release the relevant portion of the indemnitor's RSA balance to the Mortgage Lender in the manner hereinafter appearing.

NOW THEREFORE, in consideration of the indemnitor whose RSA PIN appears herein towards transfer of the portion of the indemnitor's RSA balance to the Mortgage Lender as equity contribution by the indemnitor who is in favour of the PFA, FCMB Pensions Limited effecting the

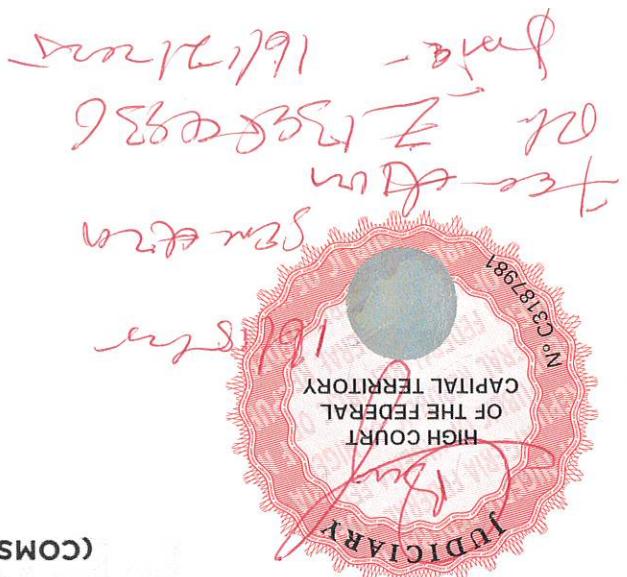
WHEREAS:

THIS INDENTITY is issued by Abuja of Techin Electronics Ltd.
(Address: Plot 820 Igbari Zone Abuja)
(hereinafter called "the Indemnitor", which expression shall where the context so permits include its successors-in-title and assigns), to **Fcmb** **Pensions** (**FPA**), having
its Head Office at **Plot 207**, **Zakaria Maiama Street**, **Cadastral Zone Ao**, **Central**
Business District, Abuja (hereinafter called "FCMB Pensions FPA"), which expression
shall where the context so permits include its successors-in-title so as to permit its successors-in-title and assigns to
use the name "FCMB Pensions FPA".

To: The Managing Director/CEO
CMB Pensions Limited
Plot 207, Zakkaria Maimalai Street,
Cadastral Zone AO, Central Business District,
Abuja.

RSA HOLDER EQUITY CONTRIBUTION INDEMNITY FORM





(COMMISSIONER FOR OATHS)

BEFORE ME

This 16th day of Dec 2025
Sworn at the High Court

Deponent

This indemnity shall be continuing security and shall be in force until **Fcmb**
Pensions Limited shall effectively discharge the indemnitor from any action, penalty,
claims, costs, expenses or liabilities that may be suffered by **Fcmb Pensions Limited**
for acceding to request to transfer funds to the Mortgage Lender. However, this
indemnity shall be inoperative and unenforceable where **Fcmb Pensions Limited**
fails, refuses or neglects to comply with the provisions of the Commissions
Guidelines or any other applicable substantive or subsidiary legislation(s) in relation
to RSA holder's request.

This indemnity shall be governed by and construed in accordance with the laws of
the Federal Republic of Nigeria.
Pensions Limited in acceding to my request to transfer funds from my RSA to the
Fcmb proceedings including any cost of litigation which may be incurred by **Fcmb**
against all losses, claims, demands, liabilities, actions, damages, penalties and
unconditionally undertakes and covenants that I shall at all times hereafter well and
truly indemnify **Fcmb Pensions Limited** and keep **Fcmb Pensions** fully indemnified
against all losses, claims, demands, liabilities, actions, damages, penalties and
mortgage Lender.

Mr. Atteguy Awokeoms (RSA HOLDER) hereby irrevocably and
acquisition of residential property in accordance with the Guidelines, I,

Amitaony Nwokeme

Yours faithfully,

Thank you.

I look forward to your quick and favourable response.

residential mortgage.

access 25% of my RSA balance to use as equity contribution for the purpose of
PEN 110024233612 domiciled in Fcmb Pensions Limited. I am writing to
My name is Amitaony Nwokeme with RSA PIN

APPLICATION TO ACCESS 25% RSA BALANCE FOR EQUITY
CONTRIBUTION TOWARDS RESIDENTIAL MORTGAGE

Dear Sir,

The Managing Director
FCMB Pensions Limited,
207 Zakaria Maimalai Street,
Central Business District,
FCT.

08/12/2025

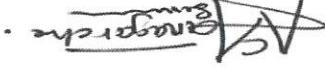
Estate Malloway, Abuja

Plot 820 Ikeja

Name: ANTHONY NOWAKOWSKI
Address: Plot 840 Tegume Estate Mombasa County
Signature: 
Date: 08/12/2025

ACCEPTED BY OFFEREE

FOR: ASA SU REALTY LIMITED



Yours faithfully

We thank you for your interests in our Company and our Estate and we look forward to mutually beneficial relationship with you.

NAME: ASA SU REALTY LIMITED
ACC. NO.: 0005850360
BANK: TAJ BANK
designed Account details below:
REALTY LIMITED by cash/transfer payment into our
duplicate copy attached with a Draft in Favour of ASA SU
kindly indicate your acceptance by signing and returning the
If the above terms and conditions are acceptable to you
ACCEPTANCE:

Company may make from time to time to address prevailing circumstances.
Contract of Sale, extant environmental and relevant laws and such other regulations as the
use of the Property and relationship with other stakeholders will be as contained in the
Without prejudice to the foregoing terms as stated above, further terms governing Buyer's

MANAGEMENT: The Buyer accepts the Company's (or its agent)
powers to solely manage the Estate.

NON-TRANSFERABILITY: This Provisional Letter Offer and any subsequent
communication made to you is personal and not
transferable except with the written consent of the
Company first had and obtained;

I hereby confirm my acceptance of this offer dated 20 and all terms and conditions therein.

NAME: Anthony Nwokeme

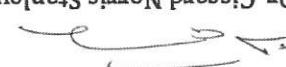
ADDRESS: Flat 820 Lagos Estate - Abuja

PHONE NUMBER: 08061993091

DATE:
SIGNATURE: 

ACCEPTANCE OF OFFER

Dr. Giscard Norris Stanley
Managing Director/CEO
Dauda Mohammed Galadima
Head, Business Development



For: ADAMAWA MORTGAGE BANK LIMITED

Yours faithfully,

- Note that upon failure or neglect to execute this offer and submit two (2) copies to us within seven (7) working days from date of collection, as evidence of acceptance, same offer shall be deemed lapsed.
- Kindly signify your understanding and acceptance of the above stated terms and conditions by signing this offer letter and the attached duplicate copies.
14. Deposit of Twelve (12) undated cheques in the repayment amount.
13. The mortgagor providing 1-year premium for property insurance policy on the collateral property with Adamawa Mortgage Bank Limited

N2,500 Debt

N4,825.58 Cost of Utility

BANK TRANSFER Payment Type

24852707 Receipt Number

4587 Order Identifier
4CB5CFA3EC4D7CF79DE8A0187549

36.7 kwh Value

ABUJA Provider

ELECTRICITY Product

01:59 AM 28th November, 2025 Date

PREPAID Meter Type

04177382639 Meter Number

GODWIN ELEH Customer Name

PLLOT 201 MABUSHI UTAKO ABUJA, JAHI AREA OFFICE Address

Anthony Nwokoma Payer Name

Transaction Summary

AEDC

BuyPower.ng
Most convenient way to buy electricity

Scan to verify



! Enter the 20 digit code on your meter to recharge.

4458-9126-1189-9916-0275

TOKEN (stdToken)

₦5,100

Order Total

₦5,100

Total Paid

₦0

Discount

₦100

Service Charge

₦174.42

VAT

₦0

Remaining Debt