



ADAMAWA MORTGAGE BANK LIMITED

No. 1, Bishop Street, Jimmeta-Yola, Adamawa State, Nigeria
RC. 7167143

ACCOUNT OPENING FORM

PASSPORT

Account Number:

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First Name: ANTHONY Middle Name: Nwokoma Surname: Nwokoma

D.O.B: 04/10/1986 Married status: ☒ Male ☐ Female

Residential address: PLOT 820 IEGUN ESTATE MARBUSHI ABUJA

Employer name & address: INSTITUTE OF HUMAN VICOLOGY, NIGERI, JAMA ABUJA

Date: 08/12/2025 Signature: [Signature]

Phone No:

0	7	0	6	7	9	7	3	0	9	1
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Means of identification

NIN (Mandatory): 41049199041

Category of Account Current: ☐ Savings: ☒

Bank Verification Number (BVN): 22234115327

Purpose of Account

Nationality: NIGERIAN State: IMO LGA: ABOH MGBAISE

Name of Next of Kin: Ogochukwu Nwokoma DOB: 09/02/1990

Relationship: Spouse Address: same

CUSTOMERS' ADDRESSES:

Permanent Address (Full Physical Address): NWOKOMA'S (COMPOUND IBEKUTA OGWUATO ABOH MGBAISE LGA, IMO STATE



NearestBusstop: ST PATRICK 1820 Landmark: ST PATRICK 1820
TypeofBuilding: Plot 820 Estate Marushi Abuja
ResidentialAddress: Plot 820 Estate Marushi Abuja

NearestBusstop: Vio Marushi Landmark: Vio Marushi
TypeofBuilding: Colour of Building
NumberofYearsInResidence: Name of Landlord
NameofBank'svisitingstaff: Signature Date: 09 Feb 1990

SPOUSEDETAILS:
NameofSpouse: Ogorkuwa Miriam Nwokoma
DateofBirth: 09 Feb 1990
ResidentialAddress(ifdifferentfromCustomer's):

Telephone: 08063535085 NoofChildren: 4
AgesofChildren: 7, 4, 2
OccupationofSpouse: Self-Employed Position: CEO
NameofSpouse Employer:

EMPLOYMENTDETAILS:
Occupation: Software Engineer/Nature of Job/business: Public Health
NameofEmployer: INSTITUTE OF HUMAN Virology Nigeria
AddressofEmployer: Jabi Abuja
TelephoneofEmployer: PositionHeld: Senior Program Officer
OfficeID No.: 955 OfficeContactPerson: Brigitte 1820

ACCOUNTDETAILS:
TypeofAccount: Purpose of Account
Bankname: Acc.No.: Source of Funds: Salary
IPISNo.: Politically Exposed Persons (PEP): YES/NO
IF YES/PLEASE GIVE DETAIL S:

FOREIGNER ONLY:
Resident Permit No.: Permit Issue Date
Permit Expiration Date: Mean of ID
I.D Card No.: Date of Issuance
Date of Expiration:

I hereby apply for the opening of an account with ADAMA 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.

Applicant Signature

[Signature]

Date

08/12/2025



REFEREE 1

Applicant Name: ANTHONY NWOKOMA
I wish to confirm that I have known the above name person for _____ Years.
Comment on the Applicants suitability for maintaining Current Account:

Name of Referee: _____
Address: _____
Bank Name: _____
Bank Address: _____
Account Number:

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REFEREE 2

Applicant Name: ANTHONY NWOKOMA
I wish to confirm that I have known the above name person for _____ years.
Comment on the Applicants suitability for maintaining Current account:

Name of Referee: _____
Address: _____
Signature: _____
Bank Name: _____
Bank Address: _____
Account Number:

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Please Note:

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

For Official Use Only

Account Opening Officer: _____ Sign & Date _____
Approval Officer: _____ Sign & Date _____

25% RSA EQUITY FUND APPLICATION FORM

PFA DETAILS

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 joints): _____
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

ADAMAWA MORTGAGE BANK LTD
Affordable shelter for all

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

RC No. 7167143

OTHER OF DETAILS

18. Residential Address: PLOT 842 JESUD ESTATE AMBAUSH ABISIT

Owner – Occupier? _____ or Rented RENTED

19. Occupation: SOFTWARE ENGINEER

20. Date Employed: JANUARY 20, 2020

21. Office Address: IPCE CADASTRAL ZONE COO, PLOT 62, WILBERT AD ABUSA

22. Present Position SENIOR PROGRAM OFFICER

23. Telephone No: 07067973891

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

25. Purpose of Loan Required: _____

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

27. Repayment period: _____

28. Monthly salary/income: _____

29. Source of income: _____

30. BVN: 222 341 15327

31. NIN: 41049199041

SPOUSE BIODATA

32. Name: 060CHUKWU MIRIAM NWOKOMA
33. Address: SAME
34. Occupation: SELF EMPLOYED
35. Address of place of work: MARBUSTI ULTRAMODERN MARKET, ABJ
36. Present Rank: OUTRER
37. Date of Employment (public servant):
38. GSM Number: 080 63535085

NEXT OF KIN BIODATA

39. Name: ~~SPOUSE~~ 060CHUKWU NWOKOMA MIRIAM
40. Address: SAME AS MINE
41. Relationship: WIFE
42. Occupation: SELF EMPLOYED
43. Address of place of work: SAME
44. GSM Number: 080 63535085

DECLARATION

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.

Signature

Date

Name of Applicant		ANTHONY NJOKOMA	
PIN (12 digits)		110024237612	
Phone No/email address		07067973091 / anthonynjokoma@gmail.com	
Date of Birth		04 / October / 200 1986	
Current Residential Address		PLOT 820 SEGUNDE ESTATE MGBUSHI ABUJA	
Employer Name		INSTITUTE OF MANAGEMENT STUDIES ABUJA	
Date of Employment		20th JANUARY, 2020	
Type of Mortgage		<input checked="" type="checkbox"/> Single <input type="checkbox"/> Joint	
Name of Primary Mortgage Lender			
Address of Mortgage Lender			
Name of property			
Address of property			
Type of property e.g (1/2/3 bedroom, Bungalow, Semi-detached or detached)			
Total Value of property(₦)			
Equity amount required(N)			
Total RSA Balance @ date of applying for statement			
Equity amount (equal or less than 25% of RSA balance			
Supplementary amount paid(if applicable)(N)			
Bank Account Details with Mortgage lender Account name			
Account No			
Bank name			
Please fill this part for Joint application only			
Spouse Name			
Spouse PIN			
Spouse PFA			
Equity amount payable by partner			

RESIDENTIAL MORTGAGE EQUITY CONTRIBUTION APPLICATION FORM

Affix recent passport



For FCMB Internal Use ONLY (To be completed by the receiving officer)

Applicant has accessed 25% job loss YES ☐ NO ☐

Applicant has VC ☐ NSITF ☐ Pre-Scheme ☐ Not applicable ☐

Please confirm documentation is complete (Required fields **Must** be filled) ☐

Confirmed by: Staff Name.....

Signature/Date.....

Branch/Location:

Applicant's Signature  Date 08/12/2025

- 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. Passport Photograph
- vi. Birth certificate/declaration of age
- vii. RSA holder indemnity form
- viii. First letter of employment (Public Sector)/Letter of introduction by Employer stating retirement date (Private sector)
- ix. Consent form(Appendix 2) consent to pay for Equity Contribution towards Residential Mortgage from RSA
- x. Insurance Policy document(to be provided by the Mortgage Lender)
- xi. Valuation report (to be provided by the Mortgage Lender)
- xii. 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.

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



Appendix 2

Plot 820 Regune Estate,
Mabasa Abuja

Confidential

The Managing Director
FCMB Pensions Limited
Plot 207 Zakaria Maimalari Street
Cadastral Zone AO CBD
Abuja.

Dear Sir,

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

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

☐ Tick if this is a Joint Application.

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.

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 Retirement Savings Account balance towards payment of Equity Contribution for Residential Mortgage by RSA Holders.

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

I have also been informed of the options to include my Voluntary Contributions contingent portion, NSITF and Pre-Scheme Contribution to augment the equity contribution in the event that 25% of my RSA balance is insufficient to pay the 25% equity contribution to the Mortgage Lender. Tick the box(es) below if you want to include any of the above options.

VC Contingent ☐ NSITF ☐ Pre-Scheme Contribution ☐

Thank you for your co-operation.

Yours faithfully,

NAME: ANTHONY Nwankom

PIN: 110024237612

PHONE NO: 07067973091

SIGNATURE: [Signature] DATE: 08/12/2025



RSA HOLDER EQUITY CONTRIBUTION INDEMNITY FORM

To:

The Managing Director/CEO

FCMB Pensions Limited

Plot 207, Zakaria Maimalari Street,

Cadastal Zone A0, Central Business District,

Abuja.

THIS INDEMNITY is issued by _____ of _____

(Address: Plot 820 Legon State Mubashir, Abuja)

(hereinafter called "the Indemnitor", which expression shall where the context so permits include its successors-in-title and assigns), to **FCMB Pensions (PFA)**, having its Head Office at **Plot 207, Zakaria Maimalari Street, Cadastal Zone A0, Central Business District, Abuja** (Hereinafter called "FCMB Pensions PFA", which expression shall where the context so permits include its successors-in-title and assigns)

WHEREAS:

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 Balance towards Payment of Equity Contributions for Residential Mortgage ("Guidelines") which Guidelines permits an RSA holder to request for application of a portion of his/her RSA balance as equity contribution towards acquiring a residential property mortgage loan from a licensed financial institution;

3. The Indemnitor is a holder RSA with **PEN110024237612** 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 Mortgage Lender, a portion of his/her RSA balance as equity contribution towards 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 and has requested that the Indemnitor provides his indemnity in favour of the PFA, **FCMB Pensions** in the manner hereinafter appearing.

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

16/12/2025
02-7-13580936
Jude-Ann
Jude-Ann
16/12/2025

Page 2 of 2



(COMMISSIONER FOR OATHS)

HIGH COURT OF THE FCT
ABUJA
COMMISSIONER FOR OATHS
DAVID O. SABASTINE

BEFORE ME

Sworn at the High Court

This 16th day of Dec. 2025

Deponent

[Signature]

acquisition of residential property in accordance with the Guidelines, I, *Anthony Nwokenye* (RSA HOLDER) hereby irrevocably and unconditionally undertakes and covenant that I shall at all times hereafter well and truly indemnify **FCMB Pensions Limited** and keep **FCMB Pensions Limited** fully indemnified against all losses, claims, demands, liabilities, actions, damages, penalties and proceedings including any cost of litigation which may be incurred by **FCMB Pensions Limited** in acceding to my request to transfer funds from my RSA to the Mortgage Lender.

This indemnity shall be a 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 Commission's 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.

Plot 820 Tegune
Estate Malawi, Moyo

08/12/2025

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

Dear Sir,

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

My name is Anthony Nwankwo with RSA PIN 110024237612 domiciled in FCMB Pensions Limited. I am writing to access 25% of my RSA balance to use as equity contribution for the purpose of residential mortgage.

I look forward to your quick and favourable response.

Thank you.

Yours faithfully,

Anthony Nwankwo



ACCEPTED BY OFFEREE

Name: ANTHONY NWAKOMA

Address: Plot 840 Igeme Estate Nwborish Nkays

Date: 08/12/2025

Signature: [Signature]

FOR: ASASU REALTY LIMITED

[Signature]

Yours faithfully

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

beneficial relationship with you.

ASASU REALTY LIMITED

0005850360

TAJ BANK

NAME:

ACC. NO.:

BANK:

ACCEPTANCE:

If the above terms and conditions are acceptable to you kindly indicate your acceptance by signing and returning the duplicate copy attached with a Draft in Favour of ASASU REALTY LIMITED by cash/transfer payment into our designated Account details below:

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

MANAGEMENT:

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

NON-TRANSFERABILITY:

This Provisional Letter of 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;

NAME: Anthony Nwokoma
 ADDRESS: Plot 820 Igboke Estate, Mgbu, Abuja
 PHONE NUMBER: 07067973091
 SIGNATURE: [Signature]
 DATE: _____

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

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.
- The mortgagor providing 1-year premium for property insurance policy on the collateral property with Adamawa Mortgage Bank limited
 - Deposit of Twelve (12) undated cheque leaves in the repayment amount.

Transaction Summary

Payer Name Anthony Nwokoma

Address PLOT 201 MABUSHI UTAKO ABUJA,
JAH I AREA OFFICE

Customer Name GODWIN ELEH

Meter Number 04177382639

Meter Type PREPAID

Date 01:59 AM 28th November, 2025

Product ELECTRICITY

Provider ABUJA

Value 36.7 kwh

Order Identifier 4CB5CFA3EC4D7CF79DE8A0187549
4587

Receipt Number 24852707

Payment Type BANK_TRANSFER

Cost of Utility ₦4,825.58

Debt ₦2.500

Remaining Debt ₦0

VAT ₦174.42

Service Charge ₦100

Discount ₦0

Total Paid ₦5,100

Order Total ₦5,100

TOKEN (stdToken) 4458-9126-1189-9916-0275

 Enter the 20 digit code on your meter to recharge.



Scan to verify