APA CONTRIBUTOR CONSENT

Version 2.0

Majestic APA Nig Ltd

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1. APA authorization

I authorize Majestic APA Nig Ltd (APA) to verify my identity through its authorized identity verification provider for pension registration, and to submit the required registration information to my selected Pension Fund Administrator and the National Pension Commission (PenCom). This authorization is limited to these purposes.

Selected Pension Fund Administrator: _____

2. CUSTOMER AUTHORIZATION FOR ACCESS TO NATIONAL IDENTITY NUMBER (NIN) INFORMATION

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 my Pension Fund Administrator, for the maintenance and operation of my Retirement Savings Account. It is my understanding that PenCom shall exercise due care to ensure that my information is secure and protected.

3. Declaration

I hereby declare and confirm that the information and particulars provided by me are true, accurate and complete to the best of my knowledge. I have read and understood the terms of the foregoing authorisation. I authorize my captured signature to be applied electronically to this completed consent for these purposes.

Name _____

Address _____

_____

_____ _____

Signature Date (DD/MM/YYYY)