This Form is FREE and NOT FOR SALE (this Form can be copied)





BENUE STATE GEOGRAPHIC INFORMATION SERVICE

Please attach
1 Passport
Picture for your
C-of-O
here carefully at
the Edge of the
Photo.
Don't pin the
Face!

APPLICATION FOR STATUTORY RIGHT-OF-OCCUPANCY

Application Form for Private Individuals

(Please complete this forn	n. Fill in CAPITAL LE	TTERS and tid	k the appropria	ate items.	Read Instructions a	at the back page a	nd refer to	full Applica	ution Guidelines.)
FOR OFFICIAL USE OF	NLY (INFO DESK):	Priva		nlication	Date: Day	Month / Year			
Section 1 APPLICAN	T DETAILS		· 17-1	pheatier	/_	101111	_		
Title:	First:	First Name	ž	Middle:	Middl	le Name	Surname:		Family Name
Gender: Male	Female Date	e of Birth: Da	ay /Month/	Year	Occupation:				No. of Children:
Nationality:		State	of Origin:			Local Gov.:			
Marital Status:	Single		— Married		Separated	Divorced	ı	W	idowed
Religion:	Christianity		Islam		None	Other		specify:	
Education:	Primary		Secondary		Tertiary	Other		specify:	
House No:	8 Stree	et Name:				(Beach Road	Ward:		(Wailwayo)
		(High Level)	City/Town			(Makurdi)	L.G.A:		(Guma)
State:	(Benue)	Country:	-	(Nigeria	P.O. /P.M.B.:	(1111)	C/O:		
Additional Address Ir	nformation:	_							(Airforce Base Makurdi)
Phone 1:			Phone 2:			15.	ID No: Pa	ssport, Na	t. ID, Driver Lic., Voters Card
TIN:		$\overline{+}$	¬ –	Email:					
1113.									
Section 2 NEXT OF K Next of Kin: First		ecify 1 Person)							
Next of Kin: First: Date Of Birth		none Number	Middle: — — —		Relationship	Surnam ———			Male Female
Full Address		One number						ender:	Ividie Female
	PICE DETAILS								
Inheritance: First:	MCE DETAILS		Middle:			Surname			
Full Address									
Section 4 REPRESEN									
Delivered in Person?	Yes	No	-		ind phone of Repr	eserrative.	Phone: —	Fami	T M
	t Name	Middle:		Middle Na	ame 	Surname: -		Ганн	ily Name
Full Address									
Section 5 DOCUMEN	ITATION								
Parcel Delineation:	the Parcel is d			ey Plan		ata / Coordinates		Site-Pla	
		_			ification is needed				
Is the Applicant the ori	_		'es	No		d you acquire the	Plot and v		
Sales Agreement	Deed	d of Conveyar	nce/Assignmer	nt/Transfe	er All	location Letter	L	Custor	mary Grant

Deed of Gift Inheritance Letter of Administration Other:											
Name of Former Owner: Date of Transaction: Day /Month / Year											
Plot Size: Plot Nu	ımber: (if applicable) Street Nam		Ward:								
Village / Community:	ty / To	wn:			L.G.A.:						
Additional Address Information	n:										
Purpose for which the Land is u											
Plot Condition: Developed Undeveloped											
Value of Improvement: Lease Term required:											
Write your comment:											
Section 6 DECLARATION											
subsequently discovered tha revoke such Certificate of Oc liability for any such rejection	o provide any false informatic t a Certificate of Occupancy w cupancy. The Governor reserve . The information you supply on edge the above declaration	as iss es the	sued base right to re form is pu	ed on false or in eject any applica blic knowledge	naco atio and	curate information, the Gove n form not properly or fully co may be published in the me	rno	r may at his sole discretion, pleted and shall not incur any			
Applicant Signature: Representative Signature :											
Section 7 LANDUSE DESCRIPTION											
Specify the Landuse or the	Purpose Clause and copy the de	scripti	on to Sect	ion 5:							
RESIDENTIAL	COMMERCIAL	O IN	STITUTION	AL	0	INDUSTRIAL	0	OPEN SPACE / GREEN AREA			
Private Residential	Commercial Housing Estate	☐ Nu	ursery Schoo	I		Quarry		Play Ground / Picnic Area			
Staff Quarter / Life Camp	Hotel	Da	ay Care			Borrow Pit		Recreation and Holiday Resort			
1	Hostel	_	ursery & Prim			Mining / Minerals		Amusement Park			
	Motel	Pr	imary Schoo	I		General Manufacturing		Game Reserve / Zoo			
	Guest House (Hospitality)	Se	econdary Sch	nool		Metal or Wood Factory		Sports Area			
	Restaurant / Fast Food	Ur	niversity			Paper, Chemicals, Textil		Golf Course			
o	Neighbourhood Centre	Re	esearch Instit	tute		Stones, Sediment, Ceramics		Equestrian Centre			
MIXED USE	Shopping Mall / Plaza	Ec	ducational Ins	stitution		Water Packaging, Bottling		Country Club / Health Farm			
Multi-Purpose	Small Shops / Corner Shops	Tr	aining / Voca	tion Cent. / College		Agro-Allied		Neighbourhood Park			
Special Development	District Market		inic					Recreational Centre			
Residential Estate	Supermarket	 но	ospital					Entertainment Complex			
	Shopping Complex	_ Ve	eterinary Clin	ic				Cemetery			
	Office	De	ental Clinic		0	PUBLIC UTILITY UNIT		National Memorial Park			
	Banking /Insurance /Services	— ∏ La	boratory		\Box	Post Office		Local Park			
	Warehouse	— ☐ Fir	e Service		Н	Power Station/ Subst./ Transformer		District Park			
	Bakery / Café	□ c∘	ourt / Jurisdic	tion	H	TV Or Radiostation		Prayer Site			
	Plant Nursery	Lib	orary		П	Water Treatment Plant					
○ AGRICULTURAL	AGRICULTURAL Workshop Cor				mmunity Centre						
Farming	Petrol Filling Station	G	overnment O	ffice	_		0	RELIGIOUS			
Horticulture	Gas Refilling Station						П	Church			
	Fuel Depot						П	Mosque			
	Garage / Carwash				0	TRANSPORTATION	П	Place Of Worship			
	Internet Café					Bus Depot	\Box	Government Place Of Worship			
	Cinema / Theatre					Motor Park	_	·			
	Sports Facility				Lorry / Trailer Park						
Documents to sub	mit for Application of C-of-O		PRIVATE	DAVMENT							
One Passport sized Photograph	Required	PAYMENT									
Copy of National ID Card or Int. Pa	Required	The Amount Inclu	ıdes	the Application Processing Fee NG	N 19	9,000					
Evidence of Tax Payment or Current Tax Clearance Certificate						-					
Survey Map or TDP or Coordinates or Site Plan						pay this amount or any other bill by					
Sales Agreement or Deed of Conv	Optional	where a Remita Reference Number (RRR) code will be generated for you, then you are to pay									
_	ant or Deed of Gift or Inheritance Docu	Required	into any Commercial Bank using the RRR code.								
or Letter of Administration											
Site Inspection Report		Optional	The Payment is r	non	Refundable.						

BENGIS Helpline: 0708 064 0436 or 0913 112 0111

Utility Bill

Court Affidavit (for lost or stolen documents)

Completed forms, evidence of payment and documents should be returned to: BENGIS Office at Beach Road, PMB 102040, Makurdi, Benue State, Nigeria.

Email: info@benuegis.org; Web: www.benuegis.org