

INSTITUTE OF LOSS ADJUSTERS OF NIGERIA

ILAN House, 2, Fagbile Street, Off Clegg Street, Opp, Polaris Bank,
Ojuelegba, Lagos. P. O. Box 2091, Marina, Lagos

APPLICATION FORM FOR CORPORATE MEMBERSHIP

1. Name of Company
2. Registered Office
.....
3. Year of Registration and number by Corporate Affairs Commission
4. Registration number of Certificate Issued to The Firm by National Insurance Commission
.....
5. ADDRESSES OF BRANCH OFFICES: (If any)
 - (i)
 - (ii)
 - (iii)
 - (iv)
6. Name of Chief Executive
7. QUALIFICATIONS OF CHIEF EXECUTIVE WITH DATES
 - (a) Professional
 - (b) Academic
 - © Others
8. PREVIOUS WORKING EXPERIENCE OF THE CHIEF EXECUTIVE

	Names of Companies	Positions Held & Date(s)
(i)
(ii)
(iii)
(iv)
(vii)
(viii)

9. DECLARATION:

1, hereby declare that I am the

Chief Executive of and that the Statements made herein are correct to the best of my knowledge and belief and the Company agrees to be governed by the constitution, Ethics of the profession and Bye-Laws or Regulations of the Institute of Loss Adjusters of Nigeria as they now exist and as may be amended from time to time.

Signature Date

10. PROPOSER:

1, Chief/Mr the (designation)

..... of (Company)

certify that the above named Company, having been duly registered should be considered as a Corporate Member of the Institute of Loss Adjusters of Nigeria.

Signature Date

11. SECONDER:

I, Chief/Mr/Mrs the (designation).....

..... of (Company)

..... hereby confirm that the above named Company, having been duly registered by NAICOM should be admitted as a Corporate Member of the Institute of Loss Adjusters of Nigeria.

Signature Date

REQUIREMENTS:

- (a) Photocopy of Registration Certificate Issued by National Insurance Commission
- (b) The Sum of ₦50,000 (non-refundable processing fee) in cash or Bank Draft drawn in favour of the INSTITUTE OF LOSS ADJUSTERS OF NIGERIA.
- © Proposer under 10 and 11 above should be either a Fellow or Associate Member of the Institute of Loss Adjusters of Nigeria.

FOR OFFICIAL USE ONLY

Draft/Cheque No:

Admission No:

Date of Admission: