This Form is FREE and NOT FOR SALE





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

## BENUE STATE GEOGRAPHIC INFORMATION SERVICE

## RECERTIFICATION AND ISSUANCE OF NEW CERTIFICATE-OF-OCCUPANCY

Application Form for Individuals (Please complete this form. Fill in CAPITAL LETTERS and tick the appropriate items. Read Instructions at the back page and refer to full Application Guidelines.) Year Date: Month File Number: **Section 1 APPLICANT DETAILS** Middle Name Title: Family Name First: Middle: Surname: Female Date of Birth: Day Month Gender: Occupation: No. of Children: Nationality: State of Origin: Local Gov.: Single Married Separated Divorced Widowed Marital Status: Christianity Other specify: Religion: Islam None Education: Primary Secondary Tertiary Other specify: (Beach Road) House No: Street Name: Ward: (Wailwayo) Village/Community: City/Town: L.G.A: State: Country: P.O. /P.M.B.: (Airforce Base Makurdi) Additional Address Information: Passport, Nat. ID, Driver Lic., Voters Card Phone 1: Phone 2: ID No: TIN: Email: Section 2 NEXT OF KIN DETAILS Next of Kin Title: Middle Name Family Name First: Middle: Surname: Date of Birth: Phone: Relationship: Male Female Gender: Full Address: Section 3 REPRESENTATIVE DETAILS Delivered in Person? If "No" give name and phone of Representative. No Middle Name Family Name First: Middle: Surname:

## **Section 4 DOCUMENTATION**

Name of Former Owner:

**Full Address** 

Proof of Ownership:	C of O (old type)	Offer Letter	Ground Rent Dema	and Digital C of O			
Parcel Delineation:	the Parcel is delineated by:	Survey Plan	Survey Data / Coordinates	Site-Plan TDP			
	the Parcel is <u>NOT</u> delineated	l and a Property Identif	ication is needed for my TDP (Obtain	a Property Identification Form)			
Is the Applicant the original Land Owner?  Yes  If "No" how did you acquire the Plot and who is the former Owner?							
Sales Agreement	Deed of Conveyance/	Assignment/Transfer	Allocation Letter	Customary Grant			
Deed of Gift Inheritance Letter of Administration Other:							

Date of Transaction:

/Month / Year

Plot Size: (in Sq.m) Plot No.: (if applicable) Street Name:										
	y/Town:		L.G	.A.:						
Additional Address Information:										
Purpose for which the Land is used / required:  (for appropriate description see below Section 6)										
Developed	Undeveloped									
Value of Improvement: Lease Term required:										
Write your comment:										
Section 5 DECLARATION										
t a Certificate of Occupancy cupancy. The Governor reser The information you supply o	was issued base ves the right to re	ed on false or i eject any applic	naccurate information, the ation form not properly or f	Governully com	or may at his sole discretion, apleted and shall not incur any					
Applicant Signature: Representative Signature:										
Section 6 LANDUSE DESCRIPTION										
Purpose Clause and copy the de COMMERCIAL Commercial Housing Estate Hotel Hostel Motel Guest House (Hospitality) Restaurant / Fast Food Neighbourhood Centre Shopping Mall / Plaza Small Shops / Corner Shops District Market Supermarket Shopping Complex Office Banking /Insurance /Services Warehouse Bakery / Café Plant Nursery Workshop Petrol Filling Station Gas Refilling Station Fuel Depot Garage / Carwash Internet Café Cinema / Theatre Sports Facility	Nursery School Day Care Nursery & Prim Primary School Secondary Sch University Research Institt Educational Ins Training / Vocat Clinic Hospital Veterinary Clini Dental Clinic Laboratory Fire Service Court / Jurisdict Library Community Cer	ary School ool ute titution tion Cent. / College c	INDUSTRIAL   Quarry   Borrow Pit   Mining / Minerals   General Manufacturing   Metal or Wood Factory   Paper, Chemicals, Textil   Stones, Sediment, Ceramics   Water Packaging, Bottling   Agro-Allied		Play Ground / Picnic Area Recreation and Holiday Resort Amusement Park Game Reserve / Zoo Sports Area Golf Course Equestrian Centre Country Club / Health Farm Neighbourhood Park Recreational Centre Entertainment Complex Cemetery National Memorial Park Local Park District Park Prayer Site					
Documents to submit according to type of Individual  One Passport sized photograph Copy of National ID Card or Int.Passport or Driving License or Voters Card Evidence of Tax Payment or Current Tax Clearance Certificate  Survey Map or TDP or Coordinates or Site Plan  Sales Agreement or Deed of Conveyance/Assignment/Transfer or Allocation Letter or Customary Grant or Deed of Gift or Inheritance Document or letter of adminstration  Site Inspection Report  Utility Bill  Court Affidavit (for lost or stolen documents)  Surrender C-of-O / copy of R-of-O		You are expect where a Remita into any Comm	PAYMENT The Amount Includes the Application Processing Fee NGN 10,000  You are expected to pay this amount or any other bill by coming to BENGIS Service Centre where a Remita Reference Number (RRR) code will be generated for you, then you are to pay into any Commercial Bank using the RRR code.  The Payment is non Refundable.							
	City  seed / required:	City/Town:    City/Town:	City/Town:    City/Town:	City/Town: L.G.    Seed / required:	City/Town: LGA.:    City/Town: LGA.:					

BENGIS Helpline: 0708 234 0822 or 0913 112 0111

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