



ASSOCIATION OF MOTOR DEALERS OF NIGERIA (AMDON)

FCT ABUJA CHAPTER



AMDON POLICE BCMR ID CARD REGISTRATION FORM TO BE FILLED IN CAPITAL LETTERS

1. APPLICANT'S NAME:.....
2. COMPANY'S NAME:.....
3. COMPANY'S AMDON REG NO:.....
4. APPLICANT'S: BVN/ DRIVER'S LICENCE/ NAT. I.D CARD/ INT'L PASSPORT **NO:**.....
(TO BE FILLED IN CAPITAL LETTERS)
5. NATIONAL IDENTIFICATION NUMBER (NIN):.....
6. COMPANY ADDRESS:.....
7. HOME ADDRESS:.....
8. (I) NATIONAL POSITION:.....
(II) STATE POSITION:.....
(III) COMPANY POSITION:.....
9. HIGHEST QUALIFICATION:..... MARITAL STATUS:.....
10. PHONE NO:..... HEIGHT:.....
11. DATE OF BIRTH:..... HOME TOWN:.....
12. STATE OF ORIGIN:..... NATIONALITY:.....
13. NAME OF NEXT OF KIN:.....
14. ADDRESS OF NEXT OF KIN:.....
15. PHONE NO. OF NEXT OF KIN:.....
16. TOTAL NUMBER OF MEMBERS IN THE COMPANY:.....
17. APPLICANT'S SIGNATURE
- APPROVAL
18. NAME AND SIGNATURE OF COMPANY CHAIRMAN/DIRECTOR
NAME:..... SIGNATURE:.....
19. NAME AND SIGNATURE OF STATE CHAIRMAN
NAME:.....SIGNATURE:.....
NATIONAL APPROVAL
20. NAME AND SIGNATURE OF APPROVING OFFICER,
NATIONAL PRESIDENT / NATIONAL SECRETARY
NAME:..... SIGNATURE:.....

N.B

I.D Card fees is payable to the Association's Account only

Account Name: Association of Motor Dealers of Nigeria

Account No: 1019445655

Banker: UBA Plc