



APPLICATION FOR STATUTORY RIGHT-OF-OCCUPANCY *Application Form for Couples*

Application Date: <u> </u> / <u> </u> / <u> </u> <small>Day / Month / Year</small>	EDL	File Number
<p>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.</p>		
Husband		
1. Title: <u> </u> First: <u> </u> Middle: <u> </u> Surname: <u> </u>		
2. Phone: <u> </u> Phone 2 : <u> </u> 3. Email: <u> </u>		
4. Identification: <input type="checkbox"/> Int. Passport <input type="checkbox"/> National ID Card <input type="checkbox"/> Driver's Lic. <input type="checkbox"/> Voter's Card ID No.: <u> </u>		
5. Date of Birth: <u> </u> / <u> </u> / <u> </u> 6. Occupation: <u> </u> 7. No. of Children: <u> </u>		
8. Nationality: <u> </u> 9. State of Origin: <u> </u> 10. Local Gov.: <u> </u>		
11. Religion: <input type="checkbox"/> Christianity <input type="checkbox"/> Islam <input type="checkbox"/> None <input type="checkbox"/> Other Specify: <u> </u>		
12. Education: <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Tertiary <input type="checkbox"/> Other Specify: <u> </u>		
Wife		
13. Title: <u> </u> First: <u> </u> Middle: <u> </u> Surname: <u> </u>		
14. Phone: <u> </u> Phone 2 : <u> </u> 15. Email: <u> </u>		
16. Identification: <input type="checkbox"/> Int. Passport <input type="checkbox"/> National ID Card <input type="checkbox"/> Driver's Lic. <input type="checkbox"/> Voter's Card ID No.: <u> </u>		
17. Date of Birth: <u> </u> / <u> </u> / <u> </u> 18. Occupation: <u> </u> 19. No. of Children: <u> </u>		
20. Nationality: <u> </u> 21. State of Origin: <u> </u> 22. Local Gov.: <u> </u>		
23. Religion: <input type="checkbox"/> Christianity <input type="checkbox"/> Islam <input type="checkbox"/> None <input type="checkbox"/> Other Specify: <u> </u>		
24. Education: <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Tertiary <input type="checkbox"/> Other Specify: <u> </u>		
Applicant's Address		
25. Does Applicant reside outside Edo State ? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Applicant's Residence <input type="checkbox"/> Permanent Family Home		
26. House No.: <u> </u> 27. Street Name: <u> </u> 28. Ward: <u> </u>		
29. Village: <u> </u> 30. City/Town: <u> </u> 31. Local Gov.: <u> </u>		
32. State: <u> </u> 33. Country: <u> </u> 34. P.O. /P.M.B.: <u> </u> 35. C/O: <u> </u>		
36. Additional Address Information: <u> </u>		
37. Delivered in Person? <input type="checkbox"/> YES <input type="checkbox"/> NO If "No", give name and phone of Representative. Phone: <u> </u>		
First: <u> </u> Middle: <u> </u> Surname: <u> </u>		
38. Identification: <input type="checkbox"/> Int. Passport <input type="checkbox"/> National ID Card <input type="checkbox"/> Driver's Lic. <input type="checkbox"/> Voter's Card ID No.: <u> </u>		
39. Is the Parcel delineated by Survey Plan ? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Attach Passport Photo that will be used for the C-of-O
Don't pin the Face!

Husband Picture

Attach Passport Photo that will be used for the C-of-O
Don't pin the Face!

Wife Picture

40. Is the Applicant the original Land Owner? YES NO 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: _____

Name of former Owner: _____ Date of Transaction: Day / Month / Year

41. Plot Size: _____ 42. Plot Number: (if applicable) _____ 43. Street Name: _____ 44. Ward: _____

45. Village: _____ 46. City/Town: _____ 47. Local Gov.: _____

48. Additional Address Information: _____

49. Purpose for which the Land is used / required:
(for appropriate description see below 49a) _____

50. Value of Improvement: _____ 51. Lease Term required: _____ 52. Plot Condition: Developed Undeveloped

53. Write your comment: _____

To your knowledge, is the land parcel the subject of any dispute? YES NO

Declaration:

It is a punishable offence to provide any false information and / or make any false statements or claims when completing this form. Where it is subsequently discovered that a Certificate of Occupancy was issued based on false or inaccurate information, the Governor may at his sole discretion, revoke such Certificate of Occupancy. The Governor reserves the right to reject any application form not properly or fully completed and shall not incur any liability for any such rejection. The information you supply on this form is public knowledge and may be published in the media.

We have read and we acknowledge the above declaration.

Husband Signature: _____ Wife Signature: _____

Representative Signature (see Item 37): _____

49 a. Specify the Landuse or the Purpose Clause and copy the description to item 48 above :

- | | | | | |
|---|--|--|---|---|
| <input type="radio"/> RESIDENTIAL
<input type="checkbox"/> Private Residential
<input type="checkbox"/> Staff Quarter / Life Camp | <input type="radio"/> COMMERCIAL
<input type="checkbox"/> Hotel
<input type="checkbox"/> Hostel
<input type="checkbox"/> Motel
<input type="checkbox"/> Guest House (Hospitality)
<input type="checkbox"/> Restaurant / Fast Food
<input type="checkbox"/> Neighbourhood Centre
<input type="checkbox"/> Shopping Mall / Plaza
<input type="checkbox"/> Small Shops / Corner Shops
<input type="checkbox"/> District Market
<input type="checkbox"/> Supermarket
<input type="checkbox"/> Shopping Complex
<input type="checkbox"/> Office
<input type="checkbox"/> Banking /Insurance /Services
<input type="checkbox"/> Warehouse
<input type="checkbox"/> Bakery / Café
<input type="checkbox"/> Plant Nursery
<input type="checkbox"/> Workshop
<input type="checkbox"/> Petrol Filling Station
<input type="checkbox"/> Gas Refilling Station
<input type="checkbox"/> Fuel Depot
<input type="checkbox"/> Garage / Carwash
<input type="checkbox"/> Internet Café
<input type="checkbox"/> Cinema / Theatre
<input type="checkbox"/> Sports Facility
<input type="checkbox"/> Event Centre | <input type="radio"/> PUBLIC INSTITUTION
<input type="checkbox"/> Nursery School
<input type="checkbox"/> Day Care
<input type="checkbox"/> Nursery & Primary School
<input type="checkbox"/> Primary School
<input type="checkbox"/> Secondary School
<input type="checkbox"/> University
<input type="checkbox"/> Research Institute
<input type="checkbox"/> Educational Institution
<input type="checkbox"/> Training / Vocation Cent. / College
<input type="checkbox"/> Clinic
<input type="checkbox"/> Hospital
<input type="checkbox"/> Veterinary Clinic
<input type="checkbox"/> Dental Clinic
<input type="checkbox"/> Laboratory
<input type="checkbox"/> Church
<input type="checkbox"/> Mosque
<input type="checkbox"/> Place Of Worship
<input type="checkbox"/> Fire Service
<input type="checkbox"/> Court / Jurisdiction
<input type="checkbox"/> Library
<input type="checkbox"/> Community Centre
<input type="checkbox"/> State Government Office
<input type="checkbox"/> Federal Government Office
<input type="checkbox"/> Morgue | <input type="radio"/> INDUSTRIAL
<input type="checkbox"/> Quarry
<input type="checkbox"/> Borrow Pit
<input type="checkbox"/> Mining / Minerals
<input type="checkbox"/> General Manufacturing
<input type="checkbox"/> Metal or Wood Factory
<input type="checkbox"/> Paper, Chemicals, Textil
<input type="checkbox"/> Stones, Sediment, Ceramics
<input type="checkbox"/> Water Packaging, Bottling
<input type="checkbox"/> Agro-Allied | <input type="radio"/> OPEN SPACE / GREEN AREA
<input type="checkbox"/> Play Ground / Picnic Area
<input type="checkbox"/> Recreation and Holiday Resort
<input type="checkbox"/> Amusement Park
<input type="checkbox"/> Game Reserve / Zoo
<input type="checkbox"/> Sports Area
<input type="checkbox"/> Golf Course
<input type="checkbox"/> Equestrian Centre
<input type="checkbox"/> Country Club / Health Farm
<input type="checkbox"/> Neighbourhood Park
<input type="checkbox"/> Recreational Centre
<input type="checkbox"/> Entertainment Complex
<input type="checkbox"/> Cemetery
<input type="checkbox"/> National Memorial Park
<input type="checkbox"/> Local Park
<input type="checkbox"/> District Park
<input type="checkbox"/> Prayer Site |
| <input type="radio"/> MIXED USE
<input type="checkbox"/> Multi-Purpose (Mostly Commercial)
<input type="checkbox"/> Comprehensive Development (Mostly Residential)
<input type="checkbox"/> Special Development | | | <input type="radio"/> PUBLIC UTILITY UNIT
<input type="checkbox"/> Post Office
<input type="checkbox"/> Power Station /Subst./ Transformer
<input type="checkbox"/> TV Or Radiostation
<input type="checkbox"/> Water Treatment Plant
<input type="checkbox"/> Dump Site | |
| <input type="radio"/> AGRICULTURAL
<input type="checkbox"/> Farming
<input type="checkbox"/> Horticulture | | | <input type="radio"/> TRANSPORTATION
<input type="checkbox"/> Bus Depot
<input type="checkbox"/> Motor Park
<input type="checkbox"/> Lorry / Trailer Park | |

Documents to Submit for Application for R-of-O :

1. One passport-sized photograph for each
2. Photo ID :
National ID Card **or** Intern'l Passport **or** Driver's Licesnse **or** Voter's Card
3. Land Transfer Documents such as Sales Agreement **or** Deed of Transfer **or** Inheritance Document
4. Survey Plan
5. Evidence of personal income tax **or** current Tax Clearance Certificate
6. Utility bill to verify Applicant's home address
7. Court affidavit and Police Report for lost or stolen documents
8. If using an Authorized Representative, a signed appointment letter and Photo ID is required
9. Bank Teller receipt for ₦ 50,000 Processing Charge
10. Site Inspection Report **Optional**

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

EDOGIS Helpline: 0813 614 9787 or 0815 661 1097

Payment

A one-time, non-refundable Processing Charge of ₦50,000 is required.

The charge must be paid to **ACCESS BANK**, Account Number **0777515446**

The bank teller receipt must be submitted together with the completed Application Form.

Completed forms, evidence of payment and documents should be returned to:

EDOGIS Office at 102 Sapele road, Benin City, Edo State, Nigeria.

Please read and fill out this form very carefully. Any mistake may cause delay in the processing of your application!