

# The Nigerian Council of Registered Insurance Brokers

DEDE O. JERE, FIM, FCIB  
President

JIDE AMINU, FIM  
Executive Secretary



(Established by Act No. 21 of 2003)

*(for Professionalism, Service and Integrity)*

**National Secretariat:**

NCRIB HOUSE,  
58, MOLEYE STREET,  
OFF HERBERT MACAULAY STREET  
P. M. B. 1100, SABO-YABA, LAGOS.  
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[www.ncrib.net](http://www.ncrib.net)

## REQUIRMENTS FOR INDIVIDUAL REGISTRATION

1. Duly completed and signed Application Form  
(TO BE PROPOSED BY TWO ACIB OR FCIB HOLDER))
2. Copies of all Credentials
3. Detailed Curriculum Vitae
4. Letter of Resignation from previous employer
5. Letter of Acceptance of Resignation
6. Letter of Appointment from current employer
7. CEO must be a director in the broking outfit
8. CEO must be an insurance professional

## MANAGEMENT

### PAST PRESIDENTS

CHEF S. A. OLATUNDE - AGBEJA, FIC PRINCE FEYISAYO BOYENWO, FIC PROSPER C. OKPUE, FIC CHEF (DR.) MICHAEL OLANKALE-COLE, FIC REV (DR) E. A. FABITI, FIC ACI M. A. ALHAJ (DR) M. H. KOGUNA, FIC FIM  
ALHAJ L. O. B. ETTI, FIC ACI SYAN OYERADEJO, FIC ACI FEMI ELUGBAJU, FIC CHEF J. OLA ESAN, FIC ACI B. J. S. JINJI, FIC FEMI JONSON, FIC (FIM) CHEF J. AKIN-GEORGE, FIC ACI FIM T. A. BRATHWAITE, FIC FIC ACI FIM



# THE NIGERIAN COUNCIL OF REGISTERED INSURANCE BROKERS

Secretariat: 'NCRIB HOUSE' 58 Moleye Street, Off Herbert Macaulay Street, Alagomeji,  
P. M. B. 1100, Yaba, Lagos, Nigeria.  
Tel. 01-7917204, 863021, 08033782761, 08037131147, 08033313433

## APPLICATION FORMS (INDIVIDUAL)

*(As prescribed by the Governing Board in pursuance of NCRIB Act NO 21 of 2003)*

### REGISTRATION/RENEWAL

ID NO.....

1. Name (in full):.....
2. Date of Birth:.....
3. Firm or Company:.....
4. Business Address/es:.....
5. Permanent Contact Address:.....
6. Contact Telephone (s):.....
7. E-Mail Address:.....
8. Nationality:..... Nationality of Origin:.....  
*(if other than present nationality)*
9. Academic Qualifications:.....
10. Professional Qualifications:.....
11. Details of Working Experience (with dates):.....  
.....  
.....
12. Have you ever been bankrupt or insolvent or made any arrangement or composition with your creditors?  
.....
13. Do you specialize in any class of insurance?.....  
a. Area of Specialisation (Please tick as appropriate)  
i. Life and Pensions Insurance  
ii. Oil and Gas Insurance  
iii. General Business & Consultancy Services
14. Are you a Partner or Director of a broking firm? If yes give names of all Partners or Co-Directors:  
.....  
.....
15. Are you engaged in any occupation other than broking:.....  
.....

Affix 2 Passport  
Size Photographs

16. Guarantors

TO BE SIGNED BY TWO FELLOWS OR ASSOCIATES (AS APPROPRIATE) OF THE COUNCIL WHO SHOULD NOT BE PARTNERS OR DIRECTORS OF THE SAME FIRM OR COMPANY NOR OF THE FIRM OR COMPANY OF WHICH THE APPLICANT IS A PARTNER OR DIRECTOR

I have known ..... for ..... Years  
To the best of my knowledge and belief the above questions are answered correctly, and in my opinion he is a suitable person to be admitted as a members of the Council.

Proposer ..... Sign: .....

Address: .....

I have known ..... for ..... years: .....

To the best of my knowledge and belief the above questions are answered correctly, and in my opinion he is a suitable person to be admitted as a member of the Council.

Secunder: ..... Sign: .....

Address: ..... Sign: .....

17. DECLARATION

I DECLARE that all the answers and details given above are true and correct.  
(Any detail found to be incorrect may nullify my application)

.....  
DECLARANT/APPLICANT'S SIGN.

FOR OFFICE USE ONLY

Received: .....

Passed on: .....

Elected on: .....