



NATIONAL PENSIONS ACT, 2008 (ACT 766) MERIT OCCUPATIONAL PENSION SCHEME (TIER 2) EMPLOYER ENROLLMENT FORM

Head Office, No.18 Dzorwulu Crescent Dzorwulu, Accra **Tel:** 0303 972 082 / 0509240841
Email: info@firstmerittrust.com **Website:** www.firstmerittrust.com



FIRST MERIT TRUST

They say "Pensions" but we call it "Legacy"

FMT Reg. No.	
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SCHEME INFORMATION (To be provided by Trustee) ^{NOTE'}

Name of Scheme	Merit Occupational Pension Scheme	NPRA Employer Enrollment No.	
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1) EMPLOYER PARTICULARS

Name of Employer			
Company Registration No.	Employer SSNIT No.	TIN:	
Business Location	Mailing Address		
Email	Fixed Line (s)		
Other Business Locations	Nature of Business		
Name of Previous Trustee	Previous Scheme ID		
Industry Category	<input type="checkbox"/> Financial Services <input type="checkbox"/> Manufacturing <input type="checkbox"/> Agricultural <input type="checkbox"/> Educational Other		

2) CONTACT PERSON

Name	Position held
Mobile No.	Email

3) CONTRIBUTION DETAILS

Number of Employees	Total 5% Monthly Contributions (GH¢)	Date of Registration
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4) EMPLOYER'S DECLARATION

I,, representative of

declare and certify that:-

- (a) the information given above is accurate and true;
- (b) we have enrolled all workers under the Scheme and have submitted workers' enrollment forms in respect of all employees of the company to the registered approved Trustee and NPRA;
- (c) we fully understand our obligations under the Scheme;
- (d) we will comply with the relevant provisions of Act 766.



Signature: Designation:

Date:

FOR OFFICIAL USE ONLY

Name of Corporate Trustee: License No.:

Signature of Corporate Trustee Representative:

DATA INPUT OFFICER:

Name: Sign: Date:



SCHEME DATA AUTHORIZING OFFICER:

Name: Sign: Date:

Note: Certificate will be issued after first payment.

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