



NIGERIAN SHIPPERS' COUNCIL

(Established by CAP 327 of Laws of the Federation of Nigeria)

MEMBERSHIP APPLICATION FORM

Please return after completion to:

The Registrar,
Shippers' Registration Scheme,
Nigerian Shippers' Council,
4, Park Lane, Apapa,
P. M. B. 50617, Ikoyi, Lagos.
Tel: 01 – 5458813-14
E-mail: info@shipperscouncil.com
Website: www.shipperscouncil.com

OR:

Any Nigerian Shippers' Council office nearest to you.
(Please see reverse side for addresses)

TYPE OF MEMBERSHIP REQUIRED (Tick One)

- CORPORATE (Limited Liability Companies, PLCs etc.)
- TRADE GROUP / ASSOCIATION (commodity groups, chambers of commerce, recognised business groups)
- BUSINESS NAMES (own name, partnerships, business names)
- PUBLIC AGENCY (Federal/State/Local Government organisations, parastatals and companies etc.)
- ASSOCIATE (potential shippers, clearing & forwarding companies, insurance companies, banks, law firms etc.)

APPLICANT SHIPPER'S DATA

NAME _____
(Name of Company / Group / Business Names / Agency / Associate to be registered)

ADDRESS _____
(Street Name)

CITY _____ STATE _____ P. O. BOX _____ P. M. B. _____

TELEPHONE _____ FAX _____ E-MAIL _____

CONTACT PERSON _____ DESIGNATION _____

SECTOR OF ACTIVITY (Please state only the most important areas of activity)

I = IMPORT, E = EXPORT (Insert in box below)		COMMODITY LINE CLASSIFICATION	FREQUENCY OF SHIPMENT	ANNUAL VOLUME/ TONNAGE (Metric Tonnes/TEUs)	(Tick Box)	
I	E				MT	TEU
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

MEMBERSHIP OF ASSOCIATIONS

MEMBER OF TRADE OR COMMODITY ASSOCIATIONS: YES NO

NAME OF THE ASSOCIATION _____

APPLICANT SHIPPER'S SIGNATURE AND STAMP: _____ DATE _____

CONTACT ADDRESSES

ZONAL COORDINATING OFFICES

NORTH-WEST

54/55 AIRPORT ROAD,
KANO, KANO STATE
TEL: 064-647874, 637719

NORTH-CENTRAL

SHIPPERS PLAZA,
438, MICHAEL OKPARA WAY,
WUSE ZONE 5,
P.M.B. 296, GARKI, ABUJA
TEL: 09-5238291, 5238297

NORTH-EAST

7, JOSEPH GOMWALK ROAD,
JOS, PLATEAU STATE.
TEL: 073-458166

SOUTH-WEST:

75, MURTALA MUHAMMED WAY,
BENIN CITY, EDO STATE
TEL: 053-254356

SOUTH-EAST

103, AZIKIWE ROAD, ABA,
ABIA STATE
TEL: 082-227656

LAGOS

4, PARK LANE, APAPA,
LAGOS
TEL: 01-5452983, 5451351

HEAD OFFICE

4, PARK LANE, APAPA, P.M.B. 50617, IKOYI, LAGOS. TEL 01-5451352-3, 5452984-6
E-mail: info@shipperscouncil.com

FOR NIGERIAN SHIPPERS' COUNCIL USE ONLY

MEMBERSHIP COMMITTEE'S COMMENTS: RECOMMENDED NOT RECOMMENDED

COMMITTEE CHAIRMAN'S SIGNATURE

DATE

REGISTRAR'S APPROVAL:

APPROVED

NOT APPROVED

REGISTRAR'S SIGNATURE

DATE

MEMBERSHIP No.:

N	S	C	/																
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