



ZARIA LOCAL GOVERNMENT KADUNA STATE, NIGERIA.

Certificate of Indigenization



This is to certify that the person whose photograph and particulars appear on this document is an indigene of Zaria Local Government

1. Name XXXXXXXXXXXX MU'AZU AMINU XXXXXXXXXXXX 4. Date of Birth XXXX 04/02/2005 XXXX
2a. Father's Name AMINU b. Tribe HAUSA 5. Place of Birth ANGUWAN KAYA, ZARIA
c. Father's Home Town ZARIA 6. District BIRNI & KEMAYE
3a. Mother's Name SAFIYA b. Tribe HAUSA 7. Village ZARIA
c. Mother's Home Town ZARIA

DECLARATION

I MU'AZU AMINU Solemnly declare
that the above information given by me are true and that I should
be held responsible if they are found to be false

Signature

Signature of Village/Ward Head

Signature of District Head

Signature of Local Government Chairman

Fee Paid: N1,000.00

Revenue Collector's Receipt No. 05371

Date: 30/11/17

Date: 16/12/17