



Application to Join APGC

Your Company Details:

Name of Company:

Address:

Postal Address:

Country:

TEL NO:

E-mail :

Website:

Name and address of MD/CEO:

Address of Plant 1:

Postal Address:

TEL NO:

E-mail :

Website:

Address of Plant 2:

Postal Address:

TEL NO:

E-mail :

Website:

Contact Name for APGC Correspondence:

(Address if different from above):

Postal Address:

Country:

TEL NO:

E-mail :

Website:



Names of directors:

1.	
2.	
3.	
4.	
5.	

Names of major shareholders:

1.	
2.	
3.	
4.	

When was your Company founded?

Day	/ month /	Year

Are you currently generating electricity? Yes ☐ No ☐

If 'yes' what is your capacity?

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How many plants/station do you have?

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Please provide a copy of your company's incorporation document that indicates you are officially registered by the law of Nigeria. Please enclose a copy of the above.

We confirm that the above company is a power generation company and we interested in applying for Full Membership.

We understand that approval of our membership is subject to the approval by the Executive Board APGC.

I Agree ☐

Signatures:

MD/CEO:

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Secretary:

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Date:

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Upon acceptance of your application an invoice for the membership fee will be sent to you. Your membership will begin upon receipt of your payment.