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Nyala Insurance S.C

Tel: 251-116-626667, Fax: 251-116-626706
Protection House, Miky Leland Street
P.O. Box: 12753, Addis Ababa, Ethiopia
e-mail: nisco@nyalainsurancesc.com

Foreign Employment Term Assurance (FETAP) Proposal Form

1. Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

(As printed in the passport)

Name: Birke Father's Name: Nanecho G. Father's Name: Debele

Date of Birth: 11-sep-92 Place of Birth: Endode Passport Number: 2P8570475 Gender: female

Address: - Region: oromia City: Shoa Sub City: w. Shoa Woreda: Ejara Kebele: hadi H. No.:

Occupation: House maid Marital Status: Single Labor ID Number: EF1020055

Contact Person in case of Emergency: Name Tariku migeresa Telephone: 0954964022

2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Neway Telephone: 0912805194

Destination Country: UAE Departure (Effective) Date:

3. Beneficiary Information

I hereby assignee the policy benefits to the flowing beneficiaries. Policy benefit payments are subject required claim documents, court order and liquidation report attested by the court.

	Full Name	Relationship	Percentage Share	Address/Telephone
i.	<u>Nanecho Debele</u>	<u>father</u>	<u>100%</u>	<u>oromia/0935879365</u>
ii.	<u></u>	<u></u>	<u></u>	<u></u>
iii.	<u></u>	<u></u>	<u></u>	<u></u>
iv.	<u></u>	<u></u>	<u></u>	<u></u>
v.	<u></u>	<u></u>	<u></u>	<u></u>
vi.	<u></u>	<u></u>	<u></u>	<u></u>
vii.	<u></u>	<u></u>	<u></u>	<u></u>
			Total	100%



Please attached copy of Passport and Kebele ID to this form.

Name of Life Assured: Birke Nanecho Signature: [Signature] Date: 21-oct-2024