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Nyala Insurance S.
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Protection House, Miky Leland Street
P.O. Box 12753, Addis Ababa, Ethiopia
e-mail: nisco@nyalainsurance.com

Foreign Employment Term Assurance (FETAP) Proposal Form

1. Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

(As printed in the passport)

Name: Meseret

Father's Name: Markos

G. Father's Name: Tirkaso

Date of Birth: 09-Nov-91 Place of Birth: Hadiya Passport Number: EQ1003704 Gender: FEMALE

Address: - Region: Central City: _____ Sub City: Hadiya Woreda: Hadaye Kebele: _____ H. No.: _____

Occupation: Housemaid Marital Status: Single Labor ID Number: _____

Contact Person in case of Emergency: Name Salomon Tirkaso Telephone: 0930620019

2. Particulars of The Travel

Agency Name: B M G Foreign Employment Agency Agency Contact Name: GETAHUN Telephone: 0911277320

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>Beletech Markos</u>	<u>Mother</u>	<u>100%</u>	<u>0929655126</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
Total			100%	

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

Name of Life Assured: Meseret Markos

Signature: [Signature]

Date: 28-Mar-25