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Tel: 251-116-626667, Fax: 251-116-626796 Protection House, Miky Leland Street P.O. Box: 12753, Addis Ababa Ethiopia e-mail: nisco @nyalainsurancesc.com

Foreign Employment Term Assurance (FETAP) Proposal Form

. Particulars of the Life Assured:			
itle: Mr./Ms./Mrs. As printed in the passport)		N 15	
	's Name: Naguss	G. Father's	Name: Tolema
Date of Birth: 17 - Jun-87 Place of Birth	Goro Tigin Pass	port Number: <u>EP884</u>	1508 Gender: FEMALE
Address: - Region: Ovorria City:	_ Sub City:	Woreda: LoneKebe	le: H. No.:
Occupation: Housemaid Marita	al Status: Marrie	Labor ID Nu	mber: <u>EF10224583</u>
Contact Person in case of Emergency: Name	Estifanos Giome	choTelephone: 0912	230417
. Particulars of The Travel			
Agency Name: B M G Foreign Employment Agency	y Agency Contact Nam	ne: GETAHUN T	elephone: 0911277320
Destination Country: UAE	Departure (Effective)	Date:	
3. Beneficiary Information			
hereby assignee the policy benefits to the flow	ving beneficiaries. Police	cy benefit payments are s	ubject required claim
locuments, court order and liquidation report a	ttested by the court.		
Full Name	Relationship	Percentage Share	Address/Telephone
i. Estifanos Gemecho	Relative	100%	0912230417
iii.			
iv.			-
V	1		1
vii.			1419 Ab Lewis and Control March State of the Control of the Contro
VII.		Total	100%
Please attached copy of Passport and Kebele II	to this form.		
Name of Life Assured: Alemi Nigu	Signature:	Om Date	17 Jan-25