



## ኒያላ ኢንሹራንስ አ-ማ Nyala Insurance S.C

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Date: 4-511-25

## Foreign Employment Term Assurance (FETAP) Proposal Form

Agency Name: Adey Agency Agency Contact Name: New Ord Telephone: 09-12805894  Destination Country: Departure (Effective) Date:  3. Beneficiary Information  Thereby 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. Alwaz Goa  ii. Abancze Esab  Brothar  Soylo  A. A openinch 109671750  iv.  v.  vi.  rii.  Total  100%	. I al deculars of the Life Assured				
Name: England Father's Name: Lob G. Father's Name: Come Gender: Female Address: - Region: South & City: Good Sub City: Good Woreda: Arba* Kebele: 04 H. No.: Mew Occupation: Hous Marid Marital Status: Sangle Labor ID Number: E19031259  Contact Person in case of Emergency: Name Arat Courts Telephone: 09-12-69-35-25  2. Particulars of The Travel  Agency Name: Adey Agency Agency Contact Name: Level Telephone: 09-12895894  Ocestination Country: Departure (Effective) Date:  3. Beneficiary Information  hereby assignee the policy benefits to the flowing beneficiaries. Policy benefit payments are subject required claim locuments, court order and liquidation report attested by the court.  Full Name Relationship Percentage Share Address/Telephone  i. Alway Good Molley South Alagorica Octobration State Share Address/Telephone  ii. Alway Good Molley South Alagorica Octobration State State State Share Address/Telephone  iii. Mone Relationship Percentage Share Address/Telephone	Title: Mr./Ms./Mrs.				
Date of Birth: 12 Jun 27 Place of Birth: 12 Jun 29 Passport Number: 2014 12 519 Gender: 12 Jun 20 Gend	(As printed in the passport)				
Address: - Region: South & City: Asmo Sub City: Asmo Woreda: Arbor Kebele: 014 H. No.: Mew Occupation: Hous Marid Status: Sangle Labor ID Number: Essocial 259  Contact Person in case of Emergency: Name Arot Countary Telephone: 09-12-69-35-25  2. Particulars of The Travel  Agency Name: Alex Agency Contact Name: New of Telephone: 09-12805894  Destination Country: South Departure (Effective) Date:  3. Beneficiary Information  Thereby 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  About God Moller Solve Solve Solve Alexandra Occupations of the Countary Solve Sol	Name: Eyerusalen	Father's Name:	G. Father	's Name: Gome	
Address: - Region: South & City: Asmo Woreda: Arbor Kebele: 014 H. No.: Mew Occupation: How Marid Status: Sangle Labor ID Numbers: Established Contact Person in case of Emergency: Name Ave & Counter Telephone: 09-12-69-35-23  2. Particulars of The Travel  Agency Name: Aday Agency Contact Name: New of Telephone: 09-12805894  Destination Country: Departure (Effective) Date:  3. Beneficiary Information  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. Along God Moller Solve So	Date of Birth: 3-5ur-91 Place	of Birth: Gamo Pas	sport Number: <u>E634</u> :	12519 Gender: Femal	ø
Occupation: Hous Marid Marital Status: Starte Labor ID Numbers Ersocht 259  Contact Person in case of Emergency: Name Avat Gunla Telephone: 09-12-69-35-25  2. Particulars of The Travel  Agency Name: Aday Agency Contact Name: 1 Telephone: 09-12805894  Destination Country: Departure (Effective) Date: 3. Beneficiary Information  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. Alanz God Moher Solo Alanz God Alanz Go	Address: - Region: South E City:	Sub City: Lono	_ Woreda: Arbar Keb	ele: 04 H. No.: New	
Contact Person in case of Emergency: Name Are Lands Telephone: 09-12-69-35-25  2. Particulars of The Travel  Agency Name: Adey Agency Agency Contact Name: New of Telephone: 09-12805894  Destination Country: Departure (Effective) Date:  3. Beneficiary Information  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. Alwar God Mosher Solve Arbanica 09679775  iii. None Solve Solve Solve Arbanica 09679775  iii. Total 100%	Occupation: Hous Mard	Marital Status: Sanza	Labor ID Nu	imber: <u>E</u> F10011258	
Agency Name: Aday Agency Agency Contact Name: New Telephone: 09-12805 894  Destination Country: Departure (Effective) Date:  3. Beneficiary Information  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. Alwaz Goa  Mollar  Byollar  Total  100%	Contact Person in case of Emergency:	Name Asvet Gunta	Telephone: 09-1	1-69-35-23	
Departure (Effective) Date:  3. Beneficiary Information  Total  Departure (Effective) Date:  Departure	2. Particulars of The Travel				
Departure (Effective) Date:  3. Beneficiary Information  Total  Departure (Effective) Date:  Departure	Agency Name: Adey Agenc	Agency Contact Nar	ne: Neway	Telephone: <u>09-1</u> 2805 \$	94
3. Beneficiary Information  Thereby 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. Almoz God  ii. Abourge Eyab  Brother  Total  Total  100%	Destination Country: Sordon	Departure (Effective	) Date:		
Full Name Relationship Percentage Share Address/Telephone  i. Almaz God Howard Eyob  ii. Abancze Eyob  v.  v.  vi.  Total  Total  Total					
Full Name Relationship Percentage Share Address/Telephone  i. Almaz Goa Mosher Broshar  Broshar  A.A organization  ii. w.  v.  vi.	hereby assignee the policy benefits to	the floring to Given Day	MANA OLI		
i. Almoz God Mother Solo Arboninch 096797#50 ii. Abeneze Eyob Brother Solo A.A organisation iv. v. vi. Total  Total  Total	documents, court order and liquidation	report attested by the court.	cy benefit payments are s	ubject required claim	
i. Almoz God Mother 5000 Arboninch 1096797750 ii. Abeneze Eyob Brother 5000 A.A 109601410366 iii. iv. v. vi.	Full Name	Relationship	Percentage Share	Address/Tolonhone	
ii. Abeneze Eyob  iii.  iv.  v.  vi.  vii.  Total  Brother  So You A.A 100%	i Al as Gos		11701	W 2 11	
iii. iv. v. vi. vii.  Total  100%	ii Maraz Sish		2000	Avbaninch 1096797	#2€
iv	1-000	Drother	50% DEMT DI	A.A 1076104106	
v					
vi					
Total 100%					
Total 100%				*	
	11.				
ease attached copy of Passport and Kebele ID to this form.			Total	100%	
	ease attached copy of Passport and Ke	ebele ID to this form.			
	ame of Life Assured: Egovusal	em Eyeb Signature:	Date:	4-541-27	