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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: webalem Father's Name: Demew G. Father's Name: Giraw

Date of Birth: 12 Jul 86 Place of Birth: Dire Dawa Passport Number: EP6894110 Gender: female

Address: - Region: aromia City: Dukem Sub City: Dukem Woreda: Zuka Kebele: welka H. No.:

Occupation: House maid Marital Status: married Labor ID Number:

Contact Person in case of Emergency: Name Ababa Teskame Telephone: 0920595674

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>Ababa teskame</u>	<u>mother</u>	<u>100%</u>	<u>Dukem/0920695674</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: webalem Demew Signature: [Signature] Date: 31-Dec-2024