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Nyala Insurance S.C

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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: Tigist Father's Name: Ashenafi G. Father's Name: chane

Date of Birth: 28-jan-84 Place of Birth: Bahir dar Passport Number: EP3128310 Gender: Female

Address: - Region: AA City: AA Sub City: cherkos Woreda: 05 Kebele: - H. No.: -

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

Contact Person in case of Emergency: Name shumet t'ibebu Telephone: 0913-215563

2. Particulars of The Travel

Agency Name: Adex Agency Agency Contact Name: Neway Telephone: 0912805194

Destination Country: Qatar 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>Shumet Tibebe</u>	<u>uncle</u>	<u>100%</u>	<u>Addis Abeba kara</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: Tigist Ashenafi Signature: [Signature] Date: 08-Aug-2024