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**Nyala Insurance S**

Tel: 251-116-626667, Fax: 251-116-  
Protection House, Miky Leland Stre  
P.O. Box: 12753, Addis Ababa, Ethio  
e-mail: nisco@nyalainsurancesc.cc

## Foreign Employment Term Assurance (FETAP) Proposal Fo

### 1. Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

(As printed in the passport)

Name: Genet Father's Name: Buser G. Father's Name: Lema

Date of Birth: 11 Sep 92 Place of Birth: kekeba wolkite Passport Number: EP885H33 Gender: FEM

Address: - Region: Oromia City: WolArsi Sub City: Gedebhasasa Woreda: Kebele: H. No.:

Occupation: House maid Marital Status: married Labor ID Number: EF10694224

Contact Person in case of Emergency: Name Baisa Amente Telephone: 0920858642

### 2. Particulars of The Travel

Agency Name: B M G Foreign Employment Agency Agency Contact Name: GETAHUN Telephone: 091127732

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>Baisa Amente</u>	<u>Husband</u>	<u>100%</u>	<u>0920858642</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: Genet Signature: [Signature] Date: 24/02/25