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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: Sebeha Father's Name: Siraj G. Father's Name: AbalulesaDate of Birth: 26-Sep Place of Birth: shebe Passport Number: EP6657516 Gender: femaleAddress: - Region: Oromiya City: Shebe Sub City: _____ Woreda: Shebe Kebele: _____ H. No.: _____Occupation: House maid Marital Status: Divorced Labor ID Number: _____Contact Person in case of Emergency: Name Tahir Siraj Telephone: 0917493902

2. Particulars of The Travel

Agency Name: Alkaba Agency Contact Name: Nejwa Telephone: 0972302010Destination Country: Dubai Departure (Effective) Date: 5-Dec-24

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>Tahir siraj</u>	<u>Brother</u>	<u>100 %</u>	<u>0917493902</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
			Total	100%

Please attached copy of Passport and Kebele ID to this form.

Name of Life Assured: Sebeha Siraj Signature: _____ Date: 5-Dec-24