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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: Tadeu Father's Name: Abe G. Father's Name: Negessa

Date of Birth: 16-Nov-87 Place of Birth: Shoa Passport Number: EP7521095 Gender: Female

Address: - Region: A-A City: Yeka Sub City: Yeka Woreda: 10 Kebele: 10 H. No.: New

Occupation: Housemaid Marital Status: Married Labor ID Number: EFHVL11779

Contact Person in case of Emergency: Name Meseret Legesse Telephone: 0921375326

### 2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Jonway Telephone: 0912805794

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>Das: Tula</u>	<u>Mother</u>	<u>60%-</u>	<u>0977041983</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____

Total

100%



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

Name of Life Assured: Tadeu Abe Signature: [Signature] Date: 4-Aug-25