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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: Almaz Father's Name: Haile G. Father's Name: mengesha

Date of Birth: 23-Jul-84 Place of Birth: Addis Ababa Passport Number: EP-6952000 Gender: female

Address: - Region: ADDIS ABABA City: AA Sub City: Lideta Woreda: 3 Kebele: 19 H. No.: -

Occupation: House maid Marital Status: single Labor ID Number: -

Contact Person in case of Emergency: Name Fikirt Kebele Telephone: 0922874898

2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Newey Telephone: 0912809194

Destination Country: Datata 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>Beza Haile</u>	<u>Sister</u>	<u>100%</u>	<u>AA/0936944164</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: Almaz Haile Signature: [Signature] Date: 20-May-2020