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THE UNITED INSURANCE COMPANY SC

Tewodros Square, <UNIC-ETHIOPIA>BLDG

Sub City: Arada, Woreda: 01, House No. 220.

E-mail: united.insurance@ethionet.et, Addis Ababa, Ethiopia

EMPLOYEE'S PROPOSAL FORM FOR FIDELITY GUARANTEE

Proposer's Name
and Address

Age:

Residential address

Please give the full name, address and business of your Employer?

What is the amount of guarantee required?

What are the duties in respect of which this Guarantee is required?

What is your monthly salary or other remuneration, and what are the deductions (if any) therefrom?

Were you and are you now guaranteed by any Company? If ye, which company and when?

Was any proposal for similar guarantee declined?

Are you single or married?

How many children or other persons are wholly dependent upon you?

What are the nature and amount of your debts or of any other existing liabilities?

Were you ever bankrupt or insolvent? or,
Did you ever compound with your creditors?
If so, in what year, what arrangement was made, and was an immediate discharge granted?

Do you have any means of support in additions to the remuneration from the employment for which this insurance is required? If so give particulars.

<p>Has applicant ever been discharged from any situation, or been deprived or a commission or any other engagement? if so, give particulars.</p>	
<p>Are you a householder? How long have you lived at your present address?</p>	

<p>Does the furniture belong to you and what is its estimate value? Is it encumbered in any way?</p>			
<p>Do you have any Life Insurance? If so, for how much, with which Company, and what is the Policy No.?</p>			
<p>What are the names address and occupations of two householders who are not related, but have been intimately known to you in private life for some years, to whom the Company may refer it necessary? (previous employers should not be named as references).</p>			
Name	Full Address	Profession or Occupation	
<p>How have you been occupied during the last five years? Please give the names and addresses of all employers accounting for the entire period.</p>			

I hereby declare that all the above statements contain the truth without any mental reservations whatsoever on my part and I request The united Insurance Company SC to furnish Security on my behalf in accordance with the above particulars. I undertake to indemnify the Employer against any loss which may arise by reason of the Company's having furnished such security.

Date: _____

Signature: _____

Producer: _____

Underwriter: _____