



ዋና መስሪያ ቤት:- አዲስ አበባ,	ክ/ከተማ:-ቦሌ		@2.9 : -	
Head Office:- Addis Ababa, Ethiopia		Sub Ci	ty:- Bole,	Wereda:- 02
ዓለም ሀንጻ 2 ^ኛ ፎቅ	የመ.ሣ.ቁዋ	C:-	4-hà:-	
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FIDELITY GUARANTEE EMPLOYER'S PROPOSAL FORM

1.	Name of Proposer:					
2.	Address of Poroposer:					
_	P. O. Box: Tel:,					
3.	Business/Occupation of Proposer:					
4.	What references were received concerning the applicant (from referees or previous employees)?					
	How has the applicant been occupied during the last five years?					
	Name of Employer Address of employer i.					
	 5. If the applicant is now or has been at any time in your service, please answere the following questions. (a) How long has he/she been in your service? 					
	(b) Have his/her honesty and general conduct always been satisfactory?					
	(c) Is any thing at present due to the employer from him?					
	6. Duties of the applicant.					
	(a) What are to be his/her duties?					
	 (b) In what way will money (and other properties) reach his/her hands? (c) Give the largest amount he/she will have at any time, and for how long he/she will have it 					
	(d) How often is he/she required to submit to the employer a statement of amounts received?					
	(e) Is he/she allowed to retain a balance in hand? If so, is it seen when his/her accounts are checked that he/she has that amount in his/her possession?					
	(f) How often the cash book (and other relevant checking documents) are checked with vouchers etc?					

(g) How often are the employer's books balanced?

- (h) Are all payments of money acknowledged on printed and numbered forms out of a book with counterfoils, and is the attention of customers drawn to this?
- (i) Will the applicant sign these receipts? ____

(j) Will the applicant be empowered to open letters addressed to the employer?

- 7. If the applicant's duties are those of a bank manager, traveler, collector of other outdoor offices, please also state:
 - a) The district (area) over which his/her duties will extend
 - b) How often will statement of account be furnished by the employer direct, and not by the applicant?
- 8. Applicant remuneration:
 - a) What are to be the applicant's remuneration and allowance and how will they be paid?
 - b) Will there be a guaranteed annual minimum?
 - c) Is the amount to be subject to any deduction or liability?
- 9. Has the applicant, to your knowledge, any debts or liabilities?
- 10. Has any person in the employer's service been detected in any fraud, dishonesty, theft embezzlement? If so, give particulars of the manner in which the default was carried out, and the steps taken to prevent repetition.
- 11. Do you know any other fact material to or affecting the risks on this proposal?
- 12. Do you have a continuous professional audit?
- 13. State the amount of guarantee required?
- 14. State the amount of excess _____

I/We declare that the above statements and particulars are true and complete and I/We agree that they shall be the basis of the Contract between Me/Us and the Company.

Date _____

Signature _____

Agent/Broker _____

Underwriter Decision _____

Logo

ZEMEN INSURANCE S.C

	¤T xÄþS xbÆ e – Addi: Ababa	ym. œ. qÜ. P. O. Box e-mail : xxxxxxxxx@ethionet.et		yť½I¤æN qÜ_éC <i>Telephone Nos</i> . +25		+251-0115575850		
yÍKS qÜ.	XXXXXXXXXXXXXX			QRNÅF				
Fax No.	EMPLOYE	E'S PROPOSAL	FOR FIDELITY (Branch GUARANTEE	2			
1.	Employee's full name:			Age:				
2.	Employee's full name: Employee's residentia	Address:						
	P.O. Bo	x	Tel:	,				
3.	What are the full nam	e, address and	business of the em	ployer?				
4.	What are the duties ir	respect of whic	h this guarantee i	s required?				
5.	What are the applican deductions (if any)	nt's (employee's)) salary or remune	eration and who	at are the	9		
6.	Are you single or mar	ried?						
7.	How many children or	other persons a	re wholly depend	ent upon you?				
8.	State the nature and o	amount of any d	lebts or of any oth	er liabilities ex	isting			
9.	Have you ever been b	ankrupted or in	solvent?					
	Do you have any mea employment for which	ns of support in	addition to the re	muneration fro				
11.	Do you own building, vehicle or any other property? If so, please state							
	How long have you liv							
13.	Give the name, addre have been intimately Company may refer if	known to you ir				o, but		
14.	How have you been of all employers should b	-	_			es of		
15.	Have you ever applied	d for a guarante	ee? If so, to which i	nsurer and whe	en			
16.	Was the application u		accepted or decline	ed?				
17.	What other type of In		o you have curren	tly?				
18.	What is the amount	of Guarantee	required?					

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I hereby declare that all the above statements are true and correct on my part and I request the Company to furnish security on my behalf in accordance with the above particulars. I undertake to indemnify the employer against any loss that may arise by reason of the Company's having such security.

Date _____

Signature _____

Agent/Broker _____

Underwriter Decision _____