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THIOPIAN INSURANCE CORPORATION

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HEAD OFFICE

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ADDIS ABABA

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Main Branch/Branch

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EMPLOYER'S FORM

PROPOSAL FOR FIDELITY GUARANTEE

1. Name of employer (if partnership state full names of partners) _____
Business _____
Address _____

2. (a) What references were received concerning the applicant? (These should be forwarded for perusal) _____

 (b) How has the applicant been occupied during the last five years? The names and addresses of all employers should be given.

3. If the applicant is now or has been at any time in your service, please answer the following questions:-
 - (a) How long has he been in your service? (Date should be given) _____
 - (b) Have his honesty and general conduct always been satisfactory? _____
 - (c) Is anything at present due to the employer from him? _____
 - (d) Please state the amount of guarantee required? _____

4. With respect to the duties of the applicant please reply as fully as possible to the following questions:

(a) What are to be his duties? _____

(b) In what way will money reach his hands? _____

(c) Give an estimate of the largest amount he will have at any one time, and for how long he will have it _____

(d) Is he allowed to pay out of cash in hand any amount on the employer's account? If so, are the payments previously authorized? When are they checked? _____

(e) How often is he required to submit to the employer a statement of amounts received? _____

(f) How often is he required to pay over amount received by him on behalf of the employer, and what are the regulations attaching thereto? If receipts with counterfoils are used will the amounts received from the applicant be checked daily with the counterfoils? _____

(g) Is he allowed to retain a balance in hand? If so how much? Is it seen when his accounts are checked that he has that amount in his possession? _____

(h) How often are the cash book entries checked with vouchers and banker's pass books? _____

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

(j) Is there anything of the nature of a continuous professional audit? _____

(k) 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 rule? _____

(l) Will the applicant sign these receipts? _____

(m) What is the system regarding outstanding accounts? Are reminders prepared and issued in a way that would not permit the applicant's interference there with? _____

(n) Will the applicant be empowered

to open letters addressed to the employer?

5. If the applicant's duties are those of a Branch Manager, Traveller, Collector of other Outdoor Official, please also state:

(a) The district over which his duties will extend

(b) How often will statement of account be furnished by the employer direct, and not through the applicant?

(c) Are all persons written to by the employer who are reported not to have paid? If so, how soon after the account is rendered? Will the applicant have any opportunity of interfering with despatch of letters of reminder?

(d) Are the applicant's travelling expenses paid by the employer?

6. (a) What are to be the applicant's remuneration and allowance (if any) 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 such as bad debts, etc.?

7. Has he to your knowledge any debts or liabilities?

8. Has any person in the employer's service been detected in any defalcation? If so, give particulars of the manner in which the default was carried out, and the steps taken to prevent a repetition.

9. Do you know any other fact material to or affecting the risks on this proposal?

10. Will the premium on this guarantee be paid by him or by you?

I/We declare that the above statements are correct, and I/We are that they shall be taken as the basis of the Contract between me/us and the ETHIOPIAN INSURANCE CORPORATION.

Signature _____

Date _____



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EMPLOYEE'S FORM

PROPOSAL FOR FIDELITY GUARANTEE

To prevent delay and to facilitate the completion of the papers, the Applicant is desired to answer every question clearly and fully, and in particular, to write plainly the postal addresses of the Employers and references

1. What is the applicant's
 - (a) Full name? _____
 - (b) Residential address? _____
 - (c) Age? _____
2. What are the full name, address and business of employer? _____
3. What is the amount of guarantee required? _____
4. What are the duties in respect of which this Guarantee is required? _____
5. What is the applicant's salary or other remuneration, and what are the deductions (if any) therefrom? _____
6. (a) Has applicant ever applied for a guarantee to this Branch or any other Branch? _____
- (b) If so, to what Branch, and at what date? _____
- (c) Was the application accepted or declined? _____

7. (a) Is the applicant single or married? _____
- (b) How many children or other persons are wholly dependent upon the applicant? _____
8. What are the nature and amount of the applicant's debts or of any other liabilities existing? _____
9. (a) Was the applicant ever bankrupt or insolvent? _____
- (b) Did the applicant ever compound with his creditors? _____
- (c) If so, in what year, what arrangement was made and was an immediate discharge granted? _____
10. Has the applicant any means of support in addition to the remuneration from the employment for which this Insurance is required? If so give particulars. _____
11. Has applicant ever been discharged from any situation, or been deprived of a commission or any other engagement? If so, give particulars. _____
12. (a) Is the applicant a householder? _____
- (b) How long has the applicant lived at his present address? _____
13. (a) Does the furniture belong to the applicant and what is its estimated value? _____
- (b) Is it encumbered? _____
14. Is the applicant's life insured? if so, for how much, and what is the Policy No.? _____
15. What are the names, addresses and occupations of two householders who are not related to, but have been intimately known to the applicant in private life for some years, to whom the Corporation may refer if necessary? (previous employers should not be named as references).

Name	Address	Profession or occupation

16. How has the applicant been occupied during the last five years? The names and addresses of all employers should be given.

N.B. - The Period must be fully accounted for.

I hereby declare that all the above statements contain the truth without any mental reservations whatsoever on my part and I request the ETHIOPIAN INSURANCE CORPORATION 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 Corporation's having furnished such security.

Dated this _____ day of _____ 20 _____

Witness _____

Signature _____