



የኢትዮጵያ ግብይት ስራ ሰራተኛ ቤት  
**ETHIOPIAN INSURANCE CORPORATION**

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 HEAD OFFICE

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 ADDIS ABABA

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**PROPOSAL FORM FOR INSURANCE AGAINST ALL RISKS**

Questions	Answers									
1. Names of Applicant and of all members of household to which this Insurance applies, giving relationship to each other										
2. Residential Address .....	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">Higher No.</td> <td style="width: 33%;"></td> </tr> <tr> <td>KEBELE No.</td> <td>House No.</td> <td></td> </tr> <tr> <td>P.O.Box</td> <td>Tel. No.</td> <td></td> </tr> </table>	City	Higher No.		KEBELE No.	House No.		P.O.Box	Tel. No.	
City	Higher No.									
KEBELE No.	House No.									
P.O.Box	Tel. No.									
3. Occupation of all members of household, nature of occupation and business to be stated.										
4. Business Address .....	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">Higher No.</td> <td style="width: 33%;"></td> </tr> <tr> <td>KEBELE No.</td> <td>House No.</td> <td></td> </tr> <tr> <td>P.O.Box</td> <td>Tel No.</td> <td></td> </tr> </table>	City	Higher No.		KEBELE No.	House No.		P.O.Box	Tel No.	
City	Higher No.									
KEBELE No.	House No.									
P.O.Box	Tel No.									
5. Is Applicant or any member of his/her family (i.e., Husband, Wife, Father, Mother, Son or Daughter) in any way connected with theatrical or entertaining profession?										
6. Has Applicant or any member of his/her family sustained any Los or Losses during the past three years which would have been covered under this form of Insurance if the Applicant had carried such a Policy ?										
7. If so, state when such Losses occurred .....										

8. Was the property insured? .....	
9. State fully circumstances and amount of Loss/Losses.	
10. Has any Insurer ever cancelled Insurance for Applicant or any member of his/her family? Has any such Insurance ever been refused? .....	
11. If so, give full particulars .....	
12. Is the property worn or carried solely by Applicant? If not, please state by whom.	
13 If any of the property is worn or carried by women other than the applicant, are any of them engaged in professional, mercantile or business pursuits? If so, give full particulars.	
14. If Husband and/or Wife are Applicants, do they reside together?	
15. Have any of the Applicants been divorced? .....	
16. If single Woman or Widow, state source of income,	
17. For what amount do you propose to take out Policy? Enter details in Schedule of Article to be insured.	
18. In what countries do you desire the Policy to be effective, (See note).	

<p>19. Is there an other material fact, within your knowledge, regarding this proposal of Insurance, which should be disclosed to the Insurers for consideration?</p>	
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**NOTE:-** Policies are usually issued subject to one of the following territorial limitations:

- (a) World-wide
- (b) Ethiopia only

**SCHEDULE OF ARTICLES TO BE INSURED**

KINDLY NOTE that the following articles should be detailed and a valuation allotted to each item:-

Guns, Revolvers, Binoculars, Cameras (including Cinematograph Cameras and Projectors), Sewing Machines, Typewriters, Gramophones, Wireless Sets, Jewelry and Valuables (Watches, Clocks, Silver Plate and the like or any article of a greater value than Birr 150.00)

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1. WEARING APPAREL AND PERSONAL EFFECTS, but excluding all types of articles mentioned hereunder (Excess Birr 50.-) \_\_\_\_\_ BIRR \_\_\_\_\_
  2. TRUNKS, SUIT CASES and other receptacles \_\_\_\_\_ BIRR \_\_\_\_\_
  3. JEWELLERY, PLATE, SILVERWARE and the like, viz: \_\_\_\_\_ BIRR \_\_\_\_\_
  4. CIGARETTE CASES, FOUNTAIN PENS, GOLD AND SILVER PENCILS and the like, viz: \_\_\_\_\_ BIRR \_\_\_\_\_
  5. WATCHES AND CLOCKS (excluding damages other than caused by fire or thieves) viz: \_\_\_\_\_ BIRR \_\_\_\_\_
  6. CAMERAS, projectors, binoculars and the like, viz: \_\_\_\_\_ BIRR \_\_\_\_\_
  7. SPECTACLES (excluding breakage) viz Pairs at BIRR }  
and Pairs at BIRR } \_\_\_\_\_ BIRR \_\_\_\_\_
  8. FALSE TEETH (EXCLUDING BREAKAGE) \_\_\_\_\_ BIRR \_\_\_\_\_
  9. FURNITURE, Carpets, camp equipment, bed and table linen and the like \_\_\_\_\_ BIRR \_\_\_\_\_

10. CUTLERY, crockery and glassware (excluding breakage) \_\_\_\_\_ BIRR \_\_\_\_\_
11. GRAMAPHONES (excluding mechanical derangement and breakage) and gramophone records (excluding breakage) \_\_\_\_\_ BIRR \_\_\_\_\_
12. MUSICAL INSTRUMENTS (excluding scratching, bruising, breakage and mechanical derangement) viz: \_\_\_\_\_ BIRR \_\_\_\_\_
13. WIRELESS SETS (against fire, burglary and theft only) viz: \_\_\_\_\_ BIRR \_\_\_\_\_
14. (a) SEWING MACHINES (excluding mechanical derangement and breakage) \_\_\_\_\_ BIRR \_\_\_\_\_  
 (b) TYPEWRITERS (excluding mechanical derangement and breakage) \_\_\_\_\_ BIRR \_\_\_\_\_
15. REFRIGERATORS against fire (excluding self-heating) burglary and theft only, viz: \_\_\_\_\_ BIRR \_\_\_\_\_
16. PICTURES AND MIRRORS (excluding breakage) \_\_\_\_\_ BIRR \_\_\_\_\_
17. BOOKS against total loss only: \_\_\_\_\_ BIRR \_\_\_\_\_
18. STAMP COLLECTION (against total loss of collection only estimated at two-thirds Stanley Gibbons Catalogued values) \_\_\_\_\_ BIRR \_\_\_\_\_
19. PROVISIONS, drinks, cigarettes and tobacco (excluding breakage of bottled goods) \_\_\_\_\_ BIRR \_\_\_\_\_
20. SPORTS EQUIPMENT (excluding breakage) viz: \_\_\_\_\_ BIRR \_\_\_\_\_
21. SURVEYING INSTRUMENT (excluding breakage and mechanical derangement) viz: \_\_\_\_\_ BIRR \_\_\_\_\_
22. MEDICAL AND SURGICAL INSTRUMENTS (excluding breakage mechanical derangement) \_\_\_\_\_ BIRR \_\_\_\_\_
23. SADDLERY \_\_\_\_\_ BIRR \_\_\_\_\_
24. FIREARMS AND AMMUNITION (excluding damage by rust, bursting or derangement) \_\_\_\_\_ BIRR \_\_\_\_\_
25. OTHER ARTICLES of exceptional values (e.g., Furs) viz: \_\_\_\_\_ BIRR \_\_\_\_\_

### **DECLARATION**

I do hereby declare that the above answers are true, that I have withheld no information whatever that might tend in any way to increase the Corporation's risk, or to influence the decision of the Corporation regarding the proposal and I undertake to exercise all ordinary and reasonable precautions for the safety of the said property. I agree that this declaration shall be held to be of

promissory nature and shall form the basis of the Contract between me and the Ethiopian Insurance Corporation and I am willing to accept the Corporation's Standard Policy.

Date \_\_\_\_\_ 19 \_\_\_\_

Signature of Proposer \_\_\_\_\_

BRANCH \_\_\_\_\_

AGENT/UNDERWRITER \_\_\_\_\_