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NILE INSURANCE COMPANY (S.C)

ካፒታል ብር
Capital Birr

40.000.000

(በሙሉ የተከፈለ)
(Fully Paid-up)

Head Office	Kirkos Br	Tewodros Br.	Addis Ketema Br.	Beklo Bet Br.	Gerji Br.	Kality Br.	Aba Koran Br.	Bole Br	Meganagna Br.
☎ 011-5514999	011-5539402	011-1552585	011-2756389/90	011-4655262	011-6298031	011-4392879	011-2779567	011-5546702	011-6188464
011-5514329	011-5531715	011-1559967	011-2772155	011-4655289	011-6298032	011-4391796	011-2779568	011-5526907	011-6510977
011-5514592	011-5531716	011-1559968	011-2772058	011-4655308	011-6294564	011-4390686	011-2779797	011-5526908	011-6635607

☒ 12836 Addis Ababa, Ethiopia

MONEY INSURANCE PROPOSAL FORM

1. Name of Proposer _____
 Business Address: Town ____ Woreda ____ Kebele ____ House No. ____ P.O.Box ____ Telephone ____
 Trade or Business _____

2. For the purpose of this insurance the term "Money" means Cash and Bank Notes, Currency Notes, Cheques (except crossed Cheques), Postal Orders, Money Orders, Postage and Revenue Stamps.
 N.B. If there are any items specified above which the Proposer does not wish to include under the Policy he may delete them. It is emphasized that there will be NO COVER under the Policy in respect of the items which are deleted.

3. COVER REQUIRED

If no cover is required for any particular item(s), insert NIL.

SECTION I – TRANSIT RISKS

(a) Transits to the premises

On Money as specified above DRAWN FROM THE BANK or POST OFFICE for wages, salaries, petty cash or sundry payments, from the time of handing over at the Bank or Post Office counter, whilst in transit until arrival at the Proposer's Premises or other places of disbursement.

(b) Transits from the premises

On Money as specified above IN TRANSIT TO THE BANK OR POST OFFICE, from the time of leaving the Proposer's premises until received by the Bank or Post Office.

(C) Other Transit (please specify) _____

Estimated aggregate amount in the year	Liability any one loss

NOTE: The premium under this Section is PROVISIONAL and is subject to adjustment on the actual amounts in transit during the period of Insurance. (Crossed cheques need not be declared).

SECTION II – PREMISES RISKS

On Money whilst in locked safe(s) or strong-room(s) (Please state maximum amount in any one safe or if more than one, state separate amount for each)

Total liability during any one period of Insurance

Birr _____

Note: SECTION II also covers loss and/or damage to safes or strong-room within the Proposer's premises caused by Burglars, Housebreakers or Thieves.

The Premium under this section is NOT subject to adjustment.

