

ስንበሳ ሲንሹራንስ ኩባን*ያ* (አ.ማ.) LION INSURANCE COMPANY (S.C.)

2: 251 - 116 - 187000 Fax: 251 - 116 - 632940 P.O.Box 26281/1000 Addis Ababa

Head office, Comet Building, Haile G/Selassie Street

BOND PROPOSAL FORM

		Date		
I/we hereby request you to issue n with the following details: -	ne/us Bid/ Performa	nce/ Supply/ Advance/	Maintenance Bond	
Principal:				
Address: Tel: Office P.O. Box:	e: Sub city	Mobile:Kebele	H.No	
Employer/ Oblige:				
Address:				
Purpose/ Nature of Contract:				
Place of Work:				
Bond Closing Date:		Opening Date:		
Date Contract Signed between En	nployer and Contract	or:		
Contract Period:				
Maintenance Period:				
Contract Amount:				
Information about the bid:				
No. Bio 1 2 3	ddar Nama	Bid A	Amount	
4 5 I/ we hereby confirm to produce a	dequate Counter Gua	arantee and/or Collatera	I to arrange the required	
cover.	1		C	
With Thanks.				