

PART B - QUOTE RETURN

Insurance Services Reference number:

Name of Applicant:

Date:

Section 4 - Quote Completion Documentation

4.1 Selection Criteria

Explanatory Notes

Applicants are required to complete all questions in this section which have space for answers. Some sections refer to criteria which are not applicable to this RFQ. This will be clearly marked with "Not Applicable to this RFQ", and you are not required to answer these sections.

All responses provided must be clearly referenced to the questions to which they relate. Copies of certificates or policies will need to be provided by the successful supplier before any contract or purchase order is placed with them.

All applicable sections of the following Selection Criteria must be completed. Failure to do so may result in your submission being excluded from further evaluation. Where the answer is a statement of fact, it must be accurate and supported by documentary evidence as appropriate. It is the Applicant's responsibility to ensure that the Council is not misled.

It is the responsibility of the Applicant to inform the Council of any matter that may affect the Applicant's continued qualification.

4.2 Financial Matters

The Council will carry out a financial check on the Applicant. This will take the form of a review of the Applicant's accounts available from Companies House. If company accounts are not available then the Council will carry out a financial check on the information available as identified in Section 3.1. The Applicant will be awarded an overall pass or fail mark based on the Council's professional judgement. This professional judgement will be provided from the Council's finance team.

Any additional information provided should be clearly referenced to the question number in your submission.

4.3 Selection Questionnaire

Part 1: Potential supplier information NOTE TO APPLICANT: Part 1 must be completed but will not be scored		
Section 1.1	Potential supplier information	
Question number	Question	Response
1.1(a)	Full name of the potential supplier submitting the information	
1.1(b) – (i)	Registered office address (if applicable)	
1.1(b) – (ii)	Registered website address (if applicable)	
1.1(c)	Please mark 'X' in the relevant box to indicate your trading status	a) a public limited company b) a limited company c) a limited liability partnership

		d) other	
		partnership	
		e) sole trader	
		f) other (please specify)	
1.1(d)	Date of registration in country of origin	эреспу)	
	Company registration number (if		
1.1(e)	applicable)		
1.1(f)	Charity registration number (if applicable)		
1.1(h)	Registered VAT number		
1.1(k)	Trading name(s) that will be used if successful in this procurement		
1.1(I)	Please mark 'X' in the relevant box to indicate whether any of the following classifications apply to you	a) Voluntary, Community and Social Enterprise (VCSE) b) Small or Medium Enterprise (SME) c) Sheltered workshop d) Public service mutual	
Plassa provi	de the following information about your a	1	orocuromont
	ac the following information about your t	appiouoni to tino i	or obtained in
Section 1.2	Bidding model		
		Response	
Section 1.2 Question	Bidding model Question	Please indicate	your answer by
Section 1.2 Question	Bidding model Question Are you bidding as the lead contact for a	Please indicate marking 'X' in the	ne relevant box.
Section 1.2 Question number	Bidding model Question	Please indicate	_
Section 1.2 Question	Bidding model Question Are you bidding as the lead contact for a	Please indicate marking 'X' in the	ne relevant box.
Section 1.2 Question number	Bidding model Question Are you bidding as the lead contact for a group of economic operators? If yes, please provide details listed in questions below. Name of group of economic operators (if	Please indicate marking 'X' in the	ne relevant box.
Section 1.2 Question number 1.2(a) - (i)	Bidding model Question Are you bidding as the lead contact for a group of economic operators? If yes, please provide details listed in questions below.	Please indicate marking 'X' in the Yes	ne relevant box. No
Section 1.2 Question number 1.2(a) - (i) 1.2(a) - (ii)	Are you bidding as the lead contact for a group of economic operators? If yes, please provide details listed in questions below. Name of group of economic operators (if applicable) Proposed legal structure if the group of economic operators intends to form a named single legal entity prior to signing a contract, if awarded. If you do not propose to form a single legal entity, please explain the legal structure. Are you or, if applicable, the group of economic operators proposing to use subcontractors? If yes, please provide details listed in questions below. Name of sub-contractors (if applicable)	Please indicate marking 'X' in th Yes	ne relevant box.
Section 1.2 Question number 1.2(a) - (i) 1.2(a) - (iii) 1.2(a) - (iiii)	Are you bidding as the lead contact for a group of economic operators? If yes, please provide details listed in questions below. Name of group of economic operators (if applicable) Proposed legal structure if the group of economic operators intends to form a named single legal entity prior to signing a contract, if awarded. If you do not propose to form a single legal entity, please explain the legal structure. Are you or, if applicable, the group of economic operators proposing to use subcontractors? If yes, please provide details listed in questions below.	Please indicate marking 'X' in the Yes	ne relevant box. No

key deliverables:	
The approximate % of contractual	
obligations assigned to each sub-	
contractor:	

Contact details and declaration

I declare that to the best of my knowledge the answers submitted and information contained in this document are correct and accurate.

I declare that, upon request and without delay I will provide the certificates or documentary evidence referred to in this document.

I understand that the information will be used in the selection process to assess my organisation's suitability to be invited to participate further in this procurement.

I understand that the authority may reject this submission in its entirety if there is a failure to answer all the relevant questions fully, or if false/misleading information or content is provided in any section.

I am aware of the consequences of serious misrepresentation.

Section 1.3	Contact details and declaration	
Question number	Question	Response
1.3(a)	Contact name	
1.3(b)	Name of organisation	
1.3(c)	Role in organisation	
1.3(d)	Phone number	
1.3(e)	E-mail address	
1.3(f)	Postal address	
1.3(g)	Signature (electronic is acceptable)	
1.3(h)	Date	

Part 2: Exclusion grounds

NOTE TO APPLICANT: this section must be completed and will be evaluated as a whole on a Pass or Fail basis. The section will be marked as a 'Fail' if "Yes" is answered to question 2.1(a) and 2.2(a) and satisfactory evidence of self-cleaning is not detailed in your response to question 2.1(b) and 2.2(b).

Section 2.1	Grounds for mandatory exclusion		
Question number	Question	Response	
2.1(a)	Regulations 57(1) and (2) The detailed grounds for mandatory exclus this web page, which should be referred to Please indicate if, within the past five years person who has powers of represents organisation been convicted anywhere in the summary below and listed on the webp	before completing s you, your organisation, decision on the world of any of the	these questions. ation or any other control in the
		Please indicate marking 'X' in the	your answer by ne relevant box.
		Yes	No

	Participation in a criminal organisation	
	Corruption	
	Fraud	
	Terrorist offences or offences linked to	
	terrorist activities	
	Money laundering or terrorist financing	
	Child labour and other forms of trafficking in human beings	
2.1(b)	If you have answered yes to question 2.1(a), please provide further details. Date of conviction, specify which of the grounds listed the conviction was for, and the reasons for conviction, Identity of who has been convicted If the relevant documentation is available electronically please provide the web address, issuing authority, precise reference of the documents.	
Section 2.2	Grounds for discretionary exclusion	
Question number	Question	Response
2.2(a)	The detailed grounds for discretionary exclon this web page, which should be refquestions. Please indicate if, within the past three yea following situations have applied to you, you who has powers of representation, decision	ferred to before completing these ars, anywhere in the world any of the pur organisation or any other person
,	who has penale of to presentation, assiste	Please indicate your answer by marking 'X' in the relevant box.
		Yes No
	Breach of social obligations?	
	Breach of labour law obligations?	
2.2(b)	If you have answered Yes to question 2.2(a), explain what measures have been taken to demonstrate the reliability of the organisation despite the existence of a relevant ground for exclusion? (Self Cleaning)	
Part 3: Selec	tion questions	
Section 3.1	Economic and financial standing	
Question number	Question	Response
3.1		Please indicate your answer by marking 'X' in the relevant box. Yes No
	Are you able to provide a copy of your audited accounts for the last two years, if requested?	

	If no, can you provide			
	(a) A statement of the			
	loss Account/income S			
	Sheet/Statement of Fir	nancial Position and		
	Statement of Cash	Flow for the most		
	recent year of trading f	or this organisation.		
	(b) A statement of the			
	for the current year an			
	outlining the current ca			
		asii aliu creuit		
	position.	6 1		
	(c) Alternative means			
	financial status if any o			
	not available (e.g. fore			
	the current year and a			
	funding provided by th	e owners and/or		
	the bank, charity accru	uals accounts or an		
	alternative means of d	emonstrating		
	financial status).	J		
	,			
Section 4	Technical and profes	sional ability		
	Please provide details	of up to three contro	acte in any combin	nation from oither
4.1				
	the public or private se			
	are relevant to our req			
	work. Contracts for su			
	the past three years. V	Vorks contracts may	be from the past t	five years.
	Consortia bids should	provide relevant exa	amples of where th	ne consortium has
		provide relevant exe	implee of whole th	io concortiani nac
	delivered similar requi			
		rements. If this is no	t possible (e.g. the	consortium is
	newly formed or a Spe	rements. If this is no ecial Purpose Vehicle	t possible (e.g. the e is to be created f	e consortium is for this contract)
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	start-up or you have provided services in the	ne past but not und	er a contract.
Response:			
Section 5	Additional questions		
5.1	Insurance		
	ertify whether you already have, or can		
	tain, prior to the commencement of the levels of insurance cover indicated below	Yes	No
•	ate your answer by marking 'X' in the	100	
relevant box)	:		
	Compulsory) Liability Insurance = £10		
million	-		
	y Insurance = £5 million		
	Indemnity Insurance = £5 million		
Product Liability Insurance = £5 million			
* It is a legal requirement that all companies hold			
	Compulsory) Liability Insurance of £5		
	ninimum. Please note this requirement is		
not applicable	e to Sole Traders.		

Section 6	Project Specific Questions			
6.1	nsurance Credit Rating Yes No			
Please self-certify your organisation holds AM Best rating of BBB+ or equivalent				

Section 5 The Pricing Document

All prices shall be stated in pounds sterling and exclusive of VAT.

Price will be the total Premium over the period of the contract. Please provide a price for each year. Please include any rate increases, such as 3.5% AWE, RPI increases or other inflationary mechanisms, brokerage fees and IPT.

The Price declared must include all fees (Including claims handling) you require for the provision of the service requested by the Council and others which may not have been requested but would form part of your bid.

	Premium (excl VAT)			
	Year 1	Year 2 (based on current exposure)	Year 3 (based on current exposure)	Total for 3 years
Premium - existing cover	£	£	£	£
Premium - subsidence cover	£	£	£	£

Premium - Terrorism cover	£	£	£	£
Premium - Cyber cover	£	£	£	£
Total	£	£	£	£

For information only, please provide the following:
Please advise any percentages applied for inflationary increases or AWE increases to inform year 2 and year 3 pricing.
Response:
Specify the amount of any/all Third Party fees
Response:
Specify whether your Final price/premium will include any Third Party Fees
Response:

Section 6 The Quality Assessment

Cover

Applicants must submit a full contract certain policy with their submission; detailing the full range of cover, policy conditions, warranties, exclusions, extension and limitations. Evaluation will consider the extent that the submitted cover meets the requirements.

Requirement:	Response:
Cover provided to meet (as a minimum) the specification in Part 4 of the tender documentation	Yes / No

Variations To existing cover: Please indicate where your quote varies to the requirements. Unless you declare variation on this sheet the Council will assume your bid includes all cover and services requested.

Requirement of the Council	Your cover offer

Claims Handling

Requirement:	Response:
Claims handling included within the premium quoted	Yes / No
It is a condition of the contract that the Applicant shall agree to allowing the Council, or its representative, free and unencumbered access to any files relating to claims and the management of claims made under any insurance policies underwritten by the Applicant on behalf of the Council. Access shall be granted within 14 days of the Council having notified the insurer of its request. Notification shall be given in writing to the Applicant by the Council.	Yes / No

Claims Handling Method Statement

Applicants should submit a Method statement to demonstrate the quality of service to be provided on a day to day basis. Please complete the relevant section in Part B. Your response should be concise and indicate as a minimum:-

- Agreement to claims handling limits requested
- How you would manage day to day queries
- Response times
- Comment on resource management
- Commitment to a consistent claims handling methodology
- Availability of online claims data
- Please indicate the point at which claim within deducible must be notified
- Service standards
- Quality measures
- If you will allow a third party claims handler (in addition to the Council) to handle claims within excess
- Online access to claims information
- Notification period to the Council upon closure of individual claims at point of closure
- Provision of one single point of contact for underwriting queries

Response:			

Added Value

Added Value Method Statement

Applicants should submit a Method statement to demonstrate the added value an Applicant can provided through the provision of additional support in areas such as operational risk management, claims defensibility and other similar services which will jointly reduce exposure risk which may be available at no additional cost to the Council.

To gain marks for these services you must clearly articulate what you will provide during the contract period within the Additional Value section. Your response should be limited to the service, the relevance and the benefit this will provide to the organisation. Risk Management Support should be provided within the price quoted. This support should be over and above work required by underwriters to better understand the risk they are accepting.

Please include in your response:

- Number of Risk Management days to be supplied per annum
- Attendance at risk management related meetings
- Confirmation on whether you offer a low claims rebate (please supply wording)

Response:			

PART C - SCHEDULES

Schedule 1 - Form of Quotation and Declarations

Request for Quotation Which Does Not Include a Formal Deed of Agreement

Having examined the Request for Quotation and its accompanying documents (which I/we shall keep) and being satisfied as to my/our abilities and experience in all respects to satisfy the requirements of the Contract.

Offer to provide or supply upon the terms and conditions of the contract contained in Appendix 1 in its present form the Services for the prices on the quoted Pricing Document as indicated below for the contract period:-

Pricing Document attached	YES / NO

and/or during the contract period at the price ascertained under the terms and conditions of contract.

I/We understand and agree that your written letter of acceptance of our Quote shall constitute the making of a binding contract between us.

I/We understand that the information provided in this quotation document and any supporting information provided by us will be relied upon and taken to be true and accurate. If it is subsequently determined that any information supplied was inaccurate, I/we understand and accept that Council reserves the right to exclude our offer to supply (if still under evaluation) or if the Contract has been awarded and the information inaccurately supplied had a significant bearing on the award, that Council shall be at liberty to terminate the Contract.

I/We understand that you are not bound to accept the lowest or any Quote you may receive.

Signed
Date
in the capacity of
duly authorised to sign for and on behalf of
(in BLOCK CAPITALS)
Telephone No
Poetal Address

Schedule 2 - Commercially Sensitive Information

The Authority may be obliged to disclose information in or relating to this Quotation following a request for information under the Freedom of Information Act (FOIA) or Environmental Information

Regulations (EIR). Please outline in the table below items which you consider are confidential and genuinely commercially sensitive and which should not be disclosed in respect of your Quotation.
I declare that I wish the following information to be designated as Commercially Sensitive.
The reason(s) it is considered that this information should be exempt under Freedom of Information Act FOIA) or Environmental Information Regulations (EIR) is:

PART D - APPENDICES

Appendix A – Insurance Agreement

In the event that a LTA is agreed, the Insurer must give the Council at least 6 months' notice in advance of the renewal date if the Insurer intends to breach the agreement. If the Insurer fails to comply with this notice period then the Insurer will be bound to offer renewal for one year at the current rates, terms and conditions.



Double click on the icon above to view the terms and conditions that apply to this RFQ.

Appendix B - Defined Terms

For the purpose of this Quotation the following words and expressions shall have the meanings set out below.		
Appendix	The referred Appendix attached to, or supplied with, this RFQ.	
Applicant	Any person or persons, firm or firms, company or companies bidding for the Services, Supplies or Works detailed in this RFQ, or, where there is more than one organisation applying, the lead organisation.	
Authorised Officer	The person(s) detailed in 1.1 of this RFQ.	
Award Criteria	The evaluation criteria that will be applied to all bids satisfying the Selection Criteria (if applicable).	
Contract	The Contract for the provision of the Services, Supplies or Works, which will be awarded to the successful Applicant.	
Council	Falmouth Town Council	

Lead Organisation	In the case of a consortium Applicant or an Applicant relying on Significant Subcontractors, the organisation responsible for leading the submission.
Quality Assessment/Evaluation	The quality element of an Applicant's bid and/or the evaluation relating to that quality aspect.
Quotation/Quote	Shall mean the Applicant's offer to the Authority, which shall be submitted as the completed procurement documents
Relevant Organisation	(a) where the Applicant is a consortium, each consortium member other than the Lead Organisation; and(b) where the Applicant or consortium member is a prime contractor, each Significant Subcontractor other than the Lead Organisation.
Request for Quotation (RFQ)	This Request for Quotation documentation for Insurance Services
Selection Criteria	The criteria used to select those Applicants whose bids will be considered for evaluation against the Award Criteria.
Significant Subcontractor	Where there is a subcontracting arrangement, each proposed subcontractor where that proposed subcontractor will be contributing significantly, either in terms of value or importance to the performance of the Works.
Services	The Service or Services as described in this RFQ.