

Town of Seabrook
Invitation for Bids

Proposal for the Following Coverage

PROPERTY AND LIABILITY COVERAGE

The Town of Seabrook is requesting proposals for property and liability (general liability, property, boiler and machinery, crime, auto, volunteer accident coverage, and public officials scheduled bond) coverage. Coverage will be commencing July 1, 2016.

Sealed proposals shall be submitted to Shaylia Marquis, Chief Procurement Officer, Town of Seabrook, 99 Lafayette Rd, Seabrook NH, 03874 until 2:00 p.m. on January 21st, 2016, and will be publically opened immediately thereafter. Proposals shall be firm up to the expected effective date of July 1, 2016.

Proposals shall be sealed and endorsed with the name of the proposer and plainly marked "Proposal for Coverage". Proposals are to include the name of the coverage organization with which the coverage will be placed. If the coverage organization is not a New Hampshire 5-B Public Sector Risk Pool, it must have an A.M. Best Policyholder's rating of A- or better. Agents and companies other than 5-B Public Sector Risk Pools must be duly licensed to do business in the State of New Hampshire by the New Hampshire Insurance Department.

The Town of Seabrook reserves the right to reject any and all proposals, to waive any and all informalities or irregularities in proposals, and to accept the proposal deemed to be in the best interest of the Town of Seabrook.

The Town of Seabrook

PROPOSAL FOR COVERAGE

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PROPOSAL SPECIFICATIONS AND CONDITIONS

1. The Town of Seabrook is requesting pricing and coverage terms/conditions for the coverage listed below for the terms of one, two, and three years. It is expected that the first-year rates will be submitted along with a locked-in or not-to-exceed percentage of increase/decrease for year two.
 - I. Property & Liability Coverage - Current Member Agreement and coverage summary containing amounts of protection and deductibles is attached for reference.
 - i. Property Coverage
 - ii. Boiler and Machinery Coverage
 - iii. Crime Coverage
 - iv. Public Officials Schedule Bond Coverage
 - v. Auto Coverage
 - vi. Comprehensive General Liability Coverage – including Personal Injury Liability, Property Damage Liability, Public Officials Errors and Omissions, Unfair Employment Practices, Employee Benefit Liability, Educators’ Legal Liability (Errors and Omissions) Coverage, and Volunteer Liability Coverage
2. All proposals must be sealed and marked “Proposal for Coverage.” Failure to meet the specification contained herein may be cause for the rejection of a proposal.
3. Each proposal must include the enclosed bid forms and must contain the full name or names of the parties making the proposal and all persons interested therein. Each vendor shall state in their proposal the names of the coverage company or companies and/or program in which they propose the coverage.
4. The effective date of the coverage is July 1, 2016.
5. Coverage shall be written with a responsible company or companies, each of which is qualified and/or licensed in the State of New Hampshire. Surplus lines companies are not desired, but should be on the New Hampshire Insurance Department’s “approved list.” All non-5-B entities must carry a current A.M. Best Rating of A- or better, proof of which shall be included with each proposal. The financial condition of the organization shall be subject to the review of the Town of Seabrook. Vendor must include a list of all public entities located in New Hampshire covered by the proposing entity.

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6. The entity submitting a proposal must provide evidence of the ability to provide effective, local claims administration and services to the Town of Seabrook. The proposal shall include a synopsis of entity operations and a certificate verifying errors and omissions coverage for the entity in the minimum amount of one million dollars (\$1,000,000).
7. The Town of Seabrook seeks a primary comprehensive property, liability, board errors and omissions, and umbrella program to encompass all of its property and all of the activities associated with the operations of the Town of Seabrook.
8. Proposals submitted to or received by the Town of Seabrook shall impose no liability or obligation upon the Town of Seabrook, and the Town of Seabrook reserves the right to request future proposals at its discretion.
9. The Town of Seabrook prefers that the proposed policy shall provide coverage on an occurrence basis. If any segment of coverage is not occurrence based, this must be specified in the proposal. Additionally, any cost or other provision for tail coverage for the claims-made portion of Public Officials Liability coverage must be specified.
10. Any differences in the coverage or services provided in the new policy must be clearly identified. Also note any additional coverage offered that the Town of Seabrook is not currently receiving. Vendor shall provide a summary of policy exclusions and exceptions. The Town of Seabrook reserves the right to consider such exceptions before awarding the contract.
11. Throughout the year the Town of Seabrook uses property owned by others for various activities. Property owners generally require that the Town of Seabrook indemnify them from claims resulting from such use and name them as additional insured on our liability coverage. Please confirm availability of this option.
12. Please provide sample copies of all proposed coverage policies.
13. Please outline available payment options.
14. Please outline all parties that will be responsible for servicing the Town of Seabrook in conjunction with this bid (e.g., claims adjudication, loss prevention, member relations, and underwriting parties). Please include names and locations of these service units.
15. Loss prevention services (including the number of loss prevention specialists available to public entities), claims handling, and other services available to the Town of Seabrook must be outlined and must be applicable to all coverage lines. The successful bidding entity will be expected to attend Joint Loss Management Committee meetings periodically. Please include a listing of all available trainings on loss management and indicate if these are available on-site, online or at a specified training location.

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RESPONSE FORM

Complete a form for each carrier for which you are submitting a proposal. Enter coverage type, form, limit, deductible, and premium. Any differences in the coverage or services provided in the new policy must be clearly identified. Attach additional explanation sheets where necessary.

Name of Coverage Carrier / Program: _____

A.M. Best Rating (Commercial Carrier or Reinsurer): _____ (Attach proof)

A.M. Best Financial Size Class (Commercial Carrier or Reinsurer): _____

PREMIUM SUMMARY (Please provide detailed exhibits for each coverage):

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VENDOR INFORMATION

Each vendor must complete the following:

Name: _____

Street: _____

City: _____

State: _____ Zip: _____

Phone: _____ Fax: _____

I(we) hereby certify that I(we) are duly authorized and licensed representatives of the above-named organization and are legally permitted to make this proposal and quote for coverage to the Town of Seabrook and will enter into an agreement and/or binder for coverage with the Town of Seabrook, on the effective dates requested, if awarded a contract in writing by May 16, 2016.

Signed:

_____ Date: _____

Printed Name: _____

Title: _____

Signed (if second signature required):

_____ Date: _____

Printed Name: _____

Title: _____