



Beaufort County School District

Solicitation Number: 21-032
Date Printed: March 19, 2021
Date Issued: March 19, 2021
Procurement Officer: Kaylee Yinger, CPPB
Phone: 843-322-2349
Email: Kaylee.Yinger@beaufort.k12.sc.us

Request for Proposals

DESCRIPTION: **Property and Casualty Insurance Broker Services**
SUBMIT OFFER BY (Opening Date & Time): **April 27, 2021 2:00 PM EST**
QUESTIONS MUST BE RECEIVED BY: **April 20, 2021**
NUMBER OF COPIES TO BE SUBMITTED: **Five (5) Original Signed Copies and One (1) Redacted Version on CD**

Offers must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior.

SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

MAILING ADDRESS:
Beaufort County School District
Procurement Office
P.O. Drawer 309
Beaufort, SC 29901-0309

PHYSICAL ADDRESS:
Beaufort County School District
Procurement Office
2900 Mink Point Blvd
Beaufort, SC 29902

AWARDS & AMENDMENTS:

Award will be posted at the Physical Address stated above on or after April 27, 2021. The award, this solicitation, and any amendments will be posted at the following web address: <http://beaufortschools.net>

You must submit a signed copy of this form with Your Offer. By submitting a proposal or bid, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of ninety (90) calendar days after the Opening Date.

NAME OF OFFEROR: _____ (Full legal name of business submitting the offer)

ENTITY TYPE: _____

AUTHORIZED SIGNATURE (Person signing must be authorized to submit binding offer to enter contract on behalf of Offeror named above)

PRINTED NAME

TITLE

Instructions regarding Offeror's name: Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror above. An offer may be submitted by only one legal entity. The entity named as the Offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.

PAGE TWO
(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for Offeror's home office/ Principal place of business):	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent):
PHONE NUMBER:	
EMAIL ADDRESS:	

PAYMENT ADDRESS (Address to which payments will be sent):	ORDER ADDRESS (Address to which all purchase orders will be sent):
<input type="checkbox"/> Payment Address Same as Home Office Address	<input type="checkbox"/> Payment Address Same as Home Office Address
<input type="checkbox"/> Payment Address Same as Home Notice Address (check one only)	<input type="checkbox"/> Payment Address Same as Notice Address (check one only)

ACKNOWLEDGEMENT OF AMENDMENTS:	<u>Amendment Number</u>	<u>Amendment Issue Date</u>
Offeror acknowledges receipt of amendments by indicating amendment number and its date of issue.		

MINORITY PARTICIPATION- Are you a Minority Business Enterprise: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please include a copy of your certification.

Questions and Answers:

1. Please provide a loss summary for the last 5 years. Loss runs are optional.
Attached to this addendum.
2. Please provide a summary of current coverage.
Provided as Addition 1 to the Solicitation on 04/06/2021
3. Is the property program part of the pool treaty, facultative reinsurance, or excess?
It is in the SCSBIT Pool.
4. What is the commission, fee, reinsurance commission, administrative fee earned on the SCSBIT placed Beaufort SD program by Willis?
This information is unavailable.
5. Please provide a copy of the full property appraisal in excel compatible file.
Attached to this addendum.