

**CITY OF CHATTANOOGA PURCHASING DEPARTMENT
101 EAST 11th STREET, CITY HALL, SUITE G-13
CHATTANOOGA, TENNESSEE 37402**

Request for Proposal No.: __176458__
Ordering Dept.: Air Pollution Control Bureau
Buyer: Deidre Keylon; e-mail: dmkeylon@chattanooga.gov (NO E-MAILED PROPOSALS ACCEPTED)
Phone No.: 423-643-7231; Fax No.: 423-643-7244

Goods/Services Being Purchased: **Insurance Broker Services - Air Pollution Control Bureau (APCB)**

**SEALED PROPOSALS MUST BE RECEIVED AS SPECIFIED,
AND NO LATER THAN 4:00 P.M. E.S.T. ON OCTOBER 16, 2018;
ALL QUESTIONS MUST BE RECEIVED IN WRITING, AS SPECIFIED,
AND NO LATER THAN 4:00 P.M. E.S.T. ON SEPTEMBER 27, 2018**

The City of Chattanooga reserves the right to reject any and/or all proposals, waive any informalities in the proposals received, and to accept any proposal which in its opinion may be for the best interest of the City. The City of Chattanooga will be non-discriminatory in the purchase of all goods and services on the basis of race, color or national origin. The City of Chattanooga (COC) Terms and Conditions posted on Website are applicable: <http://www.chattanooga.gov/purchasing/standard-terms-and-conditions>

All proposals received are subject to the terms and conditions contained herein and as listed in the above referenced website. The undersigned Offeror acknowledges having received, reviewed, and agrees to be bound to these terms and conditions, unless specific written exceptions are otherwise stated within Offeror's proposal.

NOTE: ALL PROPOSALS MUST BE SIGNED.

PLEASE PROVIDE THE FOLLOWING:

Company Name: _____

Mailing Address: _____

City & Zip Code: _____

Phone/Toll-Free No.: _____

Fax No.: _____

E-Mail Address: _____

Contact Person: _____

Signature: _____

Date: _____

COMPLETED AND SIGNED COVER PAGE MUST BE RETURNED WITH PROPOSAL

Request for Proposal

Insurance Broker Services for the Air Pollution Control Bureau

City of Chattanooga, Tennessee,
on behalf of the Air Pollution Control Bureau



The Air Pollution Control Bureau is soliciting proposals for insurance broker services to supply insurance consulting services as needed and to provide insurance policies for the APCB.

PURPOSE OF RFP

The City of Chattanooga (the City) on behalf of the Air Pollution Control Bureau is seeking proposals from qualified professional insurance brokers, licensed in Tennessee, which are experienced in providing insurance consulting services and policies.

GENERAL INFORMATION

The insurance brokers shall be assigned the responsibility of obtaining the most adequate and financially responsible coverages for the Air Pollution Control Bureau.

The procurements will be through the City's Purchasing Department and subsequent placement of coverage is the responsibility of the Air Pollution Control Bureau and its attorney.

TERM

Any resulting blanket or other contract will be for a period of 12 months to 60 months. The most common duration of contract is one year with one-year renewals at the agreement of both parties. The maximum contract term is 60 months.

No purchase is guaranteed.

I. MINIMUM PROPOSAL REQUIREMENTS/CONDITIONS

In order for the City and APCB to more thoroughly evaluate technical abilities, auxiliary services and management programs, proposers are encouraged to provide as much information as they deem necessary to demonstrate their abilities.

1. Agents/Brokers/Carriers submitting proposals must be licensed/qualified to conduct business in the State of Tennessee.
2. Agents/Brokers shall complete the enclosed AGENT/BROKER QUESTIONNAIRE.
3. All insurance company or underwriter proposed by the Insurance Proposer shall be an admitted company or underwriter, A.M. Best's Insurance Policyholder's Rating of "A" or better and a Financial Size Category Rating of "VIII" (eight) or higher is preferred.
4. Agents/Brokers shall furnish evidence of Errors & Omissions Coverage with limits of at least One Million Dollars (\$1,000,000.00) per occurrence and placed with a carrier rated "A" or better in the current A.M. Best Rating Guide

5. Agents/Brokers shall list at least three (3) reference accounts, either current or within the past two (2) years, that may be contacted as references.
6. In addition, the agent/broker may list or include any other relative qualifications that they feel sets them apart from others.
7. Describe your firm's access to the commercial marketplace.
8. Explain what is unique about how your firm approaches the negotiation process with insurance carriers.
9. Explain the process your company uses during the renewal cycle.
10. Response to this RFP constitutes acknowledgement and acceptance of all procedures and provisions contained in this document and agreement to adhere to the procedures, practices and requirements contained herein.
11. Company/carrier shall provide a list of claims (loss history) as requested by City or APCB, typically on an annual basis, but no more frequently than quarterly.
12. When submitting your proposal, include proposal of how your fees will be determined.
13. After award of a broker, when submitting quotes, companies shall submit specimen policies with their proposals.
14. When insurance is obtained, the Air Pollution Control Bureau shall be listed as the named insured on the policy with all official notice or contact being through the Air Pollution Control Bureau, 6125 Preservation Drive, Suite 140, Chattanooga, TN 37416.
15. All proposals must be open and valid for a ninety (90) day period commencing upon proposal opening on October 16, 2018.

DO NOT APPROACH ANY INSURERS ON BEHALF OF THE CITY OR APCB; PROPOSERS ARE NOT TO RESPOND TO THIS RFP BY PROVIDING INSURANCE QUOTATIONS. CONTACT WITH CARRIERS FOR THE PURPOSE OF PREPARING PROPOSALS IS NOT TO BE MADE BY THE PROPOSERS AND MAY BE GROUNDS FOR DISQUALIFICATION.

7. BROKER SPECIFICATIONS

A. Cover Letter

Each proposal will have a cover letter on the letterhead of the organization submitting the proposal. The cover letter must briefly summarize the broker's ability to provide the services specified in the RFP. The cover letter shall be signed by a representative who has the legal capacity to enter the organization into a formal contract with the City of Chattanooga/Air Pollution Control Bureau.

B. Company Overview

1. Provide the legal name and address of the broker and state of incorporation submitting the proposal. Also identify all subcontractors or joint venture partners.
2. Provide an overview and history of your company. How long has the broker been providing services to local governments? Describe the organization and ownership. Include an organizational chart.
3. Describe your total organization, including any parent companies, subsidiaries, affiliates, and other related entities.
4. Describe the ownership structure of your organization, including any significant or controlling equity holders.
5. Describe any organizational changes such as divestitures, acquisitions, or spin-offs involving your insurance broker services business segments that have occurred in the last two (2) years or are anticipated in the future.

C. Public Entity Expertise

1. Describe your firm's background, experience and exposure to companies/organizations similar to the City of Chattanooga/Air Pollution Control Bureau.
2. Please describe your company's capabilities in governments/municipalities and the role of industry specialization in your client service model.

D. Service

1. Describe your client engagement platform.
2. Describe your organization's customer service philosophy and describe how it is communicated and reinforced throughout the organization.

3. Describe your proposed transition procedure (i.e., steps to be taken, data required timing) assuming you are the selected Broker. Are there any separate charges associated with the transition?

E. Proposed Team

1. Describe the key individuals, along with their qualifications, professional certifications and experience that would comprise your organization's team for providing services to the City of Chattanooga/Air Pollution Control Bureau.

I. SCOPE OF SERVICES

- A. Assigned Personnel:** The Broker shall designate a principal to be assigned to this account to act as the primary contact for the Air Pollution Control Bureau. The Air Pollution Control Bureau must approve the principal and any other personnel assigned to perform services for the Air Pollution Control Bureau (hereafter collectively referred as "assigned personnel"). If for any reason the Air Pollution Control Bureau finds, in its sole discretion, that the service provided by any assigned personnel is unsatisfactory, the broker will agree to assign replacement personnel that must be approved by the Air Pollution Control Bureau. Personnel assigned to the account must have a minimum of five (5) years full time experience as a broker and a minimum of five (5) years full time experience with public entities insurance and self-insured insurance program management is preferred.

PROGRAM ADMINISTRATION: Program administration shall include, but not be limited to the following:

1. Act as an independent insurance advisor to the Air Pollution Control Bureau and proactively provide ongoing unbiased professional advice and recommendations that benefits the Air Pollution Control Bureau.
2. Proactively provides ongoing review and analysis of the CityAir Pollution Control Bureau's needs as related to these types of coverage.
3. Be familiar with the major exposures of the Air Pollution Control Bureau.
4. Assure that insurance policies are placed in a timely manner, without lapse in coverage periods, with reputable and financially responsible insurers.
5. Provide service for the placement of these insurance policies for the Air Pollution Control Bureau, inclusive of processing all changes, endorsements and verifying the accuracy of invoices within a reasonable time.

6. Provide early notice of rate and coverage changes or renewal problems through a process to be mutually agreed upon with the Air Pollution Control Bureau.
7. Assure all policies purchased are reviewed by Broker and policies are provided to the Air Pollution Control Bureau before renewal date or within thirty (30) days of receipt.
8. Provide loss runs annually and provide a loss analysis when requested for each policy written forty five (45) days prior to renewal.
9. Upon request of the Air Pollution Control Bureau, but at least once a year, provide a comprehensive report that reviews all of the Air Pollution Control Bureau's insurance programs as related to coverage needs
10. Through a mutually agreed upon process, monitor the Air Pollution Control Bureau's operations and loss exposures and make any appropriate recommendations for coverage changes or new coverage.
11. Be available to answer questions or obtain answers from underwriters for policy coverage questions.
12. Meet with City/Air Pollution Control Bureau staff and designated representatives as reasonably requested.
13. Provide consultation service and written reports as normally expected of a professional broker to a client.
14. Provide loss control services and assistance with claims as requested by the Air Pollution Control Bureau.

I. COMPENSATION

Give an analysis of the total cost of the Broker Services. Include full disclosure of any income other than fees paid by the Air Pollution Control Bureau that you expect to receive.

EVALUATION CRITERIA AND METHOD

All proposals submitted in response to this RFP will be evaluated by an Evaluation Committee in accordance with the criteria described below. Total scores will be tabulated, and the contract will be awarded to the proposer whose proposal is deemed to be in the best interest of the Air Pollution Control Bureau.

Evaluation Team

A team consisting of individuals will receive all proposals submitted. Each proposal will be awarded a maximum of 5 points based on the evaluation criteria. The City, at its sole judgment, will decide if a proposal is viable.

In preparing responses, Offerors should describe in detail how they propose to meet the specifications as detailed in this solicitation document.

The specific categorical criteria that will be applied to the proposal information, in order to assist the City/Air Pollution Control Bureau in selecting the most qualified proposer(s) for the contract, are as follows:

- **20 percent: Competence/Approach to Scope of Work**
- **20 percent: Qualifications and Team Experience**
- **35 percent: Price/Value/Cost**
- **25 percent: Reference Projects**

Selection of Finalist(s)

After review of the proposals by the Evaluation Team and formal presentations (if any), the City may, at its sole option, elect to reject all proposals or elect to pursue the project further. In the event that the City decides to pursue the project further, the City will select the highest ranked finalist(s) to negotiate an agreement.

Selection of Proposers for formal presentations (if any) and for contract negotiations will be evaluated based on an objective evaluation of the criteria listed above.

Formal Presentations

In the event that a Proposer cannot be selected solely on the Proposals submitted, the City may invite up to three (3) qualified firms for formal presentations. The City reserves the right, however, to invite more or less than this number, if the quality of the proposals so merits.

The Evaluation Team may revise the initial scores based upon additional information and clarification received in this phase. If your company is invited to give a presentation, the offered dates may not be flexible.

A presentation is for the purpose of clarification only and also may not be required, and therefore, complete information must be submitted with a proposer's proposal.

GENERAL INSTRUCTIONS TO PROPOSERS

Sealed Proposals must be submitted to the Purchasing Division, City of Chattanooga, in the format specified in this document for time-stamping by no later than 4:00 p.m., e.s.t., on October 16, 2018, to the attention of:

City of Chattanooga Purchasing Division
Attn: Deidre Keylon
101 East 11th Street,
Suite G13
Chattanooga, TN 37402
Phone: (423) 643-7231
Fax: (423) 643-7244

Late or misdirected proposals shall be rejected and returned unopened without exception. Postmarks are not accepted. E-mailed proposals are not accepted.

REQUEST FOR INFORMATION/QUESTIONS

All questions, and requests for information or clarification must be submitted in writing, and will be accepted until 4:00 pm, est, on September 27, 2018, and shall be sent to:

rfp@chattanooga.gov

With the e-mail subject line: QUESTION FOR RFP 176458 Insurance Broker Services - APCB

If e-mail is inaccessible, questions and requests for information can be mailed in a clearly marked envelope which must indicate on the outside "**QUESTION FOR RFP 176458 Insurance Broker Services - APCB**" to:

City of Chattanooga Purchasing Division
Attn: Deidre Keylon, Buyer
101 East 11th Street, Suite G13
Chattanooga, TN 37402

Or, the question/request for information can be faxed with the same identifying information above to:

Fax: (423) 643-7244

All answers will be provided by addendum posted at www.chattanooga.gov, then Bid

Solicitations as soon as possible after the deadline for questions.

Communication During the RFP Process

Any communication concerning this RFP must be conducted exclusively with the City of Chattanooga Purchasing Division Buyer, until the evaluation and award process has been completed. Failure to follow this procedure will be negatively viewed in the selection process.

Response Format: Cover Letter

Include a cover letter, issued by an Officer of the proposing business entity, introducing your organization, summarizing your qualifications, and detailing any exceptions to the Standard Terms and Conditions.

Include principal contact information for this RFP, including address, telephone number, email address, and website (if applicable).

Number and Type of Copies

Proposer shall submit one complete, unbound printed copy and one electronic copy in PDF format on a flash drive. No disks. Jump drive or flash drive required. All proposals shall be submitted in a sealed non-transparent envelope or box clearly marked "**RFP 176458 Insurance Broker Services - APCB**".

Detailed Technical Proposals

Complete technical submittals shall be submitted with the Proposal. These technical submittals shall describe in detail how the Proposer complies with each specification requirement of the RFP. Any deviations from the specifications shall be noted.

Implied Requirements

All products and services not specifically mentioned in this RFP, but which are necessary to provide the functional capabilities described by the Proposer, shall be included in the Proposal.

Proposer-Supplied Materials

Any material submitted by a Proposer shall become the property of the City unless otherwise requested in writing at the time of submission. **Any firm submitting a proposal should assume the information included in the proposal is subject to the Open Records / Freedom of Information Act.**

Incurring Costs

The City shall not be liable for any cost incurred by the proposer prior to the issuance of a contract purchase agreement and will not pay for the information solicited or obtained. Proposer shall not include or integrate any such expense as part of its proposal.

Economy of Preparation

Proposals shall be prepared simply and economically. Proposals shall provide a straightforward and concise proposal description. Emphasis shall be placed on clarity and content.

Proposal Withdrawal Procedure

A Proposal may be withdrawn at any time until the date and time set above for opening of proposals. Any proposal not so withdrawn shall, upon opening, constitute an irrevocable offer to provide the specifications set forth in the proposal, until the successful proposal(s) is/are accepted and a contract has been executed between the City and the successful Proposer(s).

General Reservation of City Rights

The City of Chattanooga may contact any firm for the purpose of obtaining additional information or clarification.

General Terms

Any contract resulting from this Request for Proposal will be subject to the City of Chattanooga Standard Terms and Conditions.

<http://www.chattanooga.gov/purchasing/standard-terms-and-conditions>

Any exceptions to said Terms and Conditions must be submitted with Proposal response in the Cover Letter as specified above.

Proposers shall state any exceptions to or deviations from the terms of this Request for Proposals and the Standard Terms and Conditions. Where proposer wishes to propose alternative approaches to meeting the City's technical or contractual requirements, these should be thoroughly explained. The Contractor shall be bound to accept all stated terms not excepted in its proposal.

City reserves the right to accept or reject any or all exceptions / deviations at its sole discretion. City reserves the right to reject excepted or conditional proposals at its sole discretion.

Contract Administration Activity

The Proposer will be expected to provide periodic reporting and/or attend Contract Administration meetings, as described in this document, or as otherwise required by the City Purchasing Division or the Air Pollution Control Bureau.

CHECKLIST OF REQUIRED SUBMISSION MATERIALS:

1. Sealed box or envelope labelled with RFP #/ title (**RFP 176458 Insurance Broker Services - APCB**), and proposer name and address
2. Complete, signed proposal
3. Completed, dated, and signed forms:
 - a. Completed and signed RFP cover page
 - b. Company cover page including exceptions
 - c. (Pricing) Proposal Cost Summary
 - d. Proposer Qualification Data Form
 - e. Agent/Broker Questionnaire
 - f. Iran Divestment Act Form
 - g. Affirmative Action Plan Form
 - h. No Contact/No Advocacy Affidavit (page must be notarized)
 - i. Signed addenda cover pages, if any addenda have been posted to www.chattanooga.gov, then Bids Solicitations, up to 48 hours prior to the RFP Due Date/Time

PROPOSER QUALIFICATION DATA

All questions must be answered clearly and comprehensively. If necessary, separate sheets may be attached.

1. Company Name of proposer (Please list official name, and any and all "doing business as" names, if any, associated with the company):

2. Main office address:

3. Phone: _____ Fax: _____

a. Email Address: _____

4. Proposers federal tax identification number: _____
(Please attach Form W-9)

5. The proposer is organized as a (specify type of entity, e.g. sole proprietor, partnership, for profit corporation, non-profit corporation, limited liability company, etc.)

6. The date the proposer was organized in its current form:

7. If a corporation or limited liability company, the state where it is formed:

8. Is your company registered with the Tennessee Secretary of State?

a. YES

b. NO - Please explain

9. How many years have you served the population described in this solicitation:

10. Describe any pending plans to reorganize or merge your organization.

11. Have you, or any officers and/or directors of your company, ever been debarred or suspended by a government from consideration for the award of contracts?

a. YES - Please list the contract party, and explain

b. NO

12. Have you, or any officers and/or directors of your company, ever been disqualified, removed, sued, or otherwise prevented from proposing on or completing any contract?

a. YES - Please list the contract party, and explain

b. NO

13. Have you, or any officers and/or directors of your company, ever been charged with liquidated damages on a contract?

a. YES - Please list the contract party, and explain

b. NO

14. Bonding

a. Limit: \$ _____

b. Bonding Company: _____

c. Address: _____

d. Phone Number: _____

AGENT/AGENCY QUESTIONNAIRE

It is not necessary to complete information already provided on another form.

EXHIBIT "A"

AGENT/AGENCY Questionnaire

Agency: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

Web-Site: _____

Number of Years in Business: _____

Address of Local Chattanooga/Hamilton County Branch: _____

Number of Employees at Local Branch: _____

Number of Employees at Office Servicing Account: _____

Number of Employees locally (Chattanooga) dedicated to Public Entity business: _____

Number of Employees at office servicing account dedicated to Public Entity business: _____

Number of Employees Globally: _____

License from both the Agency and the Account Manager Attached: YES or NO

Account Manager: _____

Alternate Account Manager: _____

Address of Alternate Account Manager: _____

Do you anticipate the same Account Manger being assigned to the City of Chattanooga for the

Attach organizational chart of entire team along with qualifications and job summaries.

What other services does your agency have that the City of Chattanooga may be able to utilize?

anticipated four (4) year contract term? (Please elaborate on your response _____

Account Manager - Number of Years in Insurance Industry: _____

Alternate Account Manager – Number of Years in Insurance Industry: _____

Account Manager Insurance Designations: _____

Account Manager Industry Recognition: _____

List all Tennessee Public Entity accounts handled by Account Manager:

Minimum Account Manager Requirements-List Public entity Accounts handled by Account Manager along with telephone numbers and e-mail addresses:

Affirmative Action Plan

The City of Chattanooga is an equal opportunity employer and during the performance of this Contract, the Contractor agrees to abide by the equal opportunity goals of the City of Chattanooga as follows:

1. The Contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, or handicap. The Contractor will take affirmative action to ensure that applicants are employed, and the employees are treated during employment without regard to their race, color, religion, sex, national origin, or handicap. Such action shall include, but not be limited to, the following: employment, upgrading, demotion, or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay, or other forms of compensation, and selection for training, including apprenticeship. The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
2. The Contractor will, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, or handicap.
3. The Contractor will send to each labor union or representative of workers with which he/she has a collective bargaining agreement or other contract or understanding, a notice advising the said labor union or workers' representatives of the Contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
4. During the term of this contract the following non-discriminatory hiring practices shall be employed to provide employment opportunities for minorities and women:
 - a. All help wanted ads placed in newspapers or other publications shall contain the phrase "Equal Employment Opportunity Employer."
 - b. Seek and maintain contracts with minority groups and human relations organizations as available.

- c. Encourage present employees to refer qualified minority group and female applicants for employment opportunities
 - d. Use only recruitment sources which state in writing that they practice equal opportunity. Advise all recruitment sources that qualified minority group members and women will be sought for consideration for all positions when vacancies occur.
5. Minority statistics are subject to audit by City of Chattanooga staff or other governmental agency.
 6. The Contractor agrees to notify the City of Chattanooga of any claim or investigation by State or Federal agencies as to discrimination.

(Signature of Contractor)

(Title and Name of Company)

(Date)

Chapter No. 817 (HB0261/SB0377). "Iran Divestment Act" enacted.
Vendor Disclosure and Acknowledgement

By submission of this bid, each proposer and each person signing on behalf of any proposer certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each proposer is not on the list created pursuant to § 12-12-106.

(SIGNED) _____

(PRINTED NAME) _____

(BUSINESS NAME) _____

(DATE) _____

For more information, please contact the State of Tennessee Central Procurement Office,

<https://www.tn.gov/generalservices/procurement/central-procurement-office--cpo-/library-/public-information-library.html>

No Contact/No Advocacy Affidavit
City of Chattanooga, Purchasing Division

State of _____
County of _____

_____ (agent name), being first duly sworn, deposes and says that:

(1) He/She is the owner, partner, officer, representative, or agent of

_____ (business name), the Submitter of the attached sealed solicitation response to Solicitation # _____;

(2) _____ (agent name) swears or affirms that the Submitter has taken notice, and will abide by the following No Contact and No Advocacy clauses:

NO CONTACT POLICY: After the posting of this solicitation, a potential submitter is prohibited from directly or indirectly contacting any City of Chattanooga representative concerning the subject matter of this solicitation, unless such contact is made with the Purchasing Division.

NO ADVOCATING POLICY: To ensure the integrity of the review and evaluation process, companies and/or individuals submitting sealed solicitation responses, as well as those persons and/or companies formally/informally representing such submitters, may not directly or indirectly lobby or advocate to any City of Chattanooga representative.

Any business entity and/or individual that does not comply with the No Contact and No Advocating policies may be subject to the rejection or disqualification of its solicitation response from consideration.

Submitter Signature: _____ Printed Name: _____

Title: _____

Subscribed and sworn to before me this _____ day of _____, 2_____.

Notary Public: _____

My commission expires: _____

CURRENT POLICY INFORMATION

Following are specifications which were included with requests for existing coverage for (1) Directors and Officers Liability Insurance, (2) Workers Compensation and Employer Liability, and (3) Long Term Disability:

Directors and Officers Liability Insurance

Coverage period beginning: April 24, 2019

Parent Organization and Address:

Chattanooga-Hamilton County Air Pollution Control Bureau (APCB)
6125 Preservation Drive, Suite 140
Chattanooga, TN 37416-3740

Policy Period:

FROM: April 24, 2019

TO: April 24, 2020

<u>Insurance</u>	<u>Limits of Liability</u>
Directors and Officers Liability period	\$1,000,000 each policy
Employment Practices period	\$1,000,000 each policy
Fiduciary Liability period	\$1,000,000 each policy
Aggregate, All Parts period	\$1,000,000 each policy
Workplace Violence period	\$1,000,000 each policy

Retention:

Directors and Officers Liability	\$2,500 for each claim
Employment Practices	\$5,000 for each claim
Fiduciary Liability	\$2,500 for each claim
Workplace Violence	\$5,000 for each act

Prior and pending dates: Prior acts must be covered if possible.
04/21/2003 through 04/24/2019 as may be applicable.

Endorsements: Provide as may be applicable to the policy.

Additional Coverage: Any and all coverage as may be applicable.

Current Insurance Information:

<u>Insurance Carrier:</u> Company	Philadelphia Insurance
<u>Current Limits:</u>	As listed above
<u>Policy Expiration:</u>	April 24, 2019

All related services provided within the annual premium cost, or otherwise identified with costs if not included in the annual premium.

Blanket limits and specific sub limits and deductibles should be clearly specified in your proposal.

Coverage shall be based on "claims made" basis if possible.

The policy will, at minimum, be annually renewable for a five year period, April 24, 2019 until April 23, 2024 with no appreciable rate increase. Agencies/Brokers/Companies/Carriers submitting bids must be licensed and admitted to conduct business in the State of Tennessee.

The City/APCB desired to award coverage to companies of sound financial rating. A minimum Best's Insurance Rating of "A" is desired.

Company/Carrier shall provide a list of claims (loss history) as requested by the City or the APCB if needed.

The Chattanooga-Hamilton County Air Pollution Control Board and Bureau shall be listed as the named insured on the policy with all official notice or contact being through the APCB, attention: Jim Holloway, 6125 Preservation Drive, Suite 140, Chattanooga, TN 37416-3740.

Agencies/Brokers/Companies/Carriers should examine the data carefully as it relates to the risk being insured and secure any additional special underwriting information that may be omitted.

Each insurance company must agree by policy endorsement not to cancel or non-renew and policy described herein without 60 days advance written notice to the APCB, except for nonpayment of premium.

List any variance from these specifications on a separate sheet as part of the bid submittal.

Workers Compensation and Employer Liability Insurance

Coverage period beginning: July 29, 2019

Parent Organization and Address:

Chattanooga-Hamilton County Air Pollution Control Bureau (APCB)
6125 Preservation Drive, Suite 140
Chattanooga, TN 37416-3740

Business Description: Governmental Agency

Policy Period:

FROM: July 29, 2019

TO: July 29, 2020

<u>Insurance</u>	<u>Limits of Liability</u>
Bodily Injury by Accident	\$100,000 each Accident
Bodily Injury by Disease	\$500,000 Policy Limit
Bodily Injury by Disease	\$100,000 each Employee
Coverage "B" Limit of Liability	\$100,000

Endorsements: Provide as may be applicable to the policy.

<u>Payroll Code</u>	<u>Payroll Description</u>	<u>Estimated Payroll</u>
3724	Millwright Work NOC	\$ 75,794
8601	Architect or Engineer	\$353,078
8810	Clerical Office Employees	\$391,265
Total Estimated Payroll:		\$820,137

Total Number of Employees: 15

Rate basis: 07/29/2013

Additional Coverage: Any and all coverage as may be applicable.

Current Insurance Information:

Insurance Carrier: Accident Fund Insurance Company of America

Current Limits: As listed above

Policy Expiration: July 29, 2020

Agencies/Brokers/Companies/Carriers submitting bids must be licensed and admitted to conduct business in the State of Tennessee.

The City/APCB desires to award coverage to companies of sound financial rating. A minimum Best's Insurance Rating of "A" is desired.

Agencies/Brokers/Companies/Carriers may list or include any relative qualifications that they feel sets them apart from others.

Company/Carrier shall provide a list of claims (loss history) as requested by the City or the APCB if needed.

The Chattanooga-Hamilton County Air Pollution Control Board and Bureau shall be listed as the named insured on the policy with all official notice or contact being through the APCB, attention: Jim Holloway, 6125 Preservation Drive, Suite 140, Chattanooga, TN 37416-3740.

All related services provided within the annual premium cost, or otherwise identified with costs if not included in the annual premium.

Blanket limits and specific sub limits and deductibles should be clearly specified in your bid.

Coverage shall be based on "claims made" bases if possible.

The policy will, at minimum, be annually renewable for a five year period, July 29, 2019 until July 29, 2024 with no appreciable rate increase except due to employee salary increase.

It is hereby understood and agreed that failure by the insured to disclose all information regarding existing hazards or exposures as of the inception date of the policy shall not alter the coverage or rights afforded the insured under this policy, provided such failure or omission is unintentional.

Each insurance company must agree by policy endorsement not to cancel or non-renew and policy described herein without 90 days advance written notice to the APCB, except for nonpayment of premium.

Official Notice of Date of Loss shall be when the APCB (Board and Bureau) is notified of any loss or damage for which this policy applies.

Proposals must be signed in ink by the authorized agent/broker with full authority to bind the coverage described herein with their assigned insurance carrier.

List any variance from these specifications on a separate sheet as part of the bid submittal.

Long Term Disability Policy

Introduction and Purpose

The City of Chattanooga, Tennessee is requesting the submittal of proposals from qualified insurance brokers for long term disability insurance policy for the Chattanooga – Hamilton County Air Pollution Control Bureau.

Minimum Proposal Requirements

1. Agents must be licensed in the State of Tennessee
2. Please complete the AGENT/BROKER QUESTIONNAIRE
3. Please list 3 references
4. Proposals must, at a minimum, meet the existing policy coverage(s) (Copy Attached).

Broker Specifications

- A. Cover letter
Please include a cover letter on letterhead of the organization submitting the proposal. The cover letter must briefly summarize the broker's ability to provide the services specified in the RFP.
- B. Broker
Please fill out the Agent/ Agency Questionnaire
- C. Service
 - a. Describe your client engagement platform
 - b. Provide a list of your service team

Please fill out spreadsheet attached.

COMPANY/BROKER NAME

STREET ADDRESS

CITY, STATE, ZIP

PHONE:

FAX:

FROM:

Jim Holloway

COMPANY NAME:

Chattanooga - Hamilton County
Air Pollution Control Bureau

PRIMARY BUSINESS

LOCATION :

(INCLUDING COUNTY)

6125 Preservation Drive
Suite
149
Chattanooga, TN 37416
Hamilton
County

**PROPOSAL
REQUEST**

DATE:

PRODUCT TO QUOTE:

Employer Paid LTD

PRIOR COVERAGE:

INSURANCE CARRIER
Lincoln Life Insurance
Company
SIC
137469552

**EMPLOYER
CONTRIBUTION:**

100%

EFFECTIVE DATE: 8

-1 2000

**CENSUS -will be sent upon
request (14 Eligible
Employees)**

To determine appropriate benefits and rating: How many employees did the company have in the previous year (calculated by averaging the total number of all employees employed on business days during the preceding calendar year)? Include all employees issued a W-2, regardless of hours worked or enrollment in the health plan. For example, this would include full-time, part-time and seasonal employees – essentially any individual employed by the employer.

DATE QUOTE NEEDED BY:

PLEASE QUOTE PLANS SIMILAR TO BELOW.....(Refer to the attached existing LTD Insurance policy)

(FOR EXAMPLE)

	LTD for all Class 1 Employees (14)
Mo Benefit	60% to \$5,000 FOR PRESIDENT/60% TO \$1,000 ALL OTHERS
EP	60 days
Benefit Duration	See attach Schedule
Own Occ Period	END OF BENEFIT DURATION

Gainful Occ	60%
Pre-Existing	6/24 Exclusion
	2
Mental Nervous	Years
	2
Substance Abuse	Years
COLA	N/A
Survivor Benefit	3X
Integration	Full Family
	5% INCREASE IN MONTHLY BENEFIT
Rehabilitation Benefit	PERCENTAGE

Anniversary date will be annual beginning on: January 1, 2019.

Class 1 is all full time employees – 14

Minimum Hours per week -	30	
Benefit Percentage -		60%
Maximum Monthly Benefits -		\$5,000
Minimum Monthly Benefits -		\$50
Elimination Period -		60 calendar days of Total Disability
Maximum Benefit Period -		See attached Current Policy
Waiting Period -		One month of continuous Active Work.
Benefit Indexing Percentage -		5%

The Proposal shall contain (Explanations of): General Provisions, Claims Procedures, Eligibility, Individual Termination, Premiums and Premium Rates, Total Disability Monthly Benefit, Progressive Income Benefit, Exclusions and Limitations, Partial Disability Monthly Benefit, Other Income Benefits, Recurrent Disability, Exclusions, Mental Illness Limitation, Substance Abuse Limitation, Prior Insurance Credit Upon Transfer Of Insurance Carriers, Disability Due to A Pre-Existing Condition, Family Income Benefit, Recovery Benefit For Commissioned Employees, Notice Concerning Coverage Under The Tennessee Life And Health Insurance Guaranty Association Act, Limits On Amount Of Coverage and any and all other pertinent information rather listed here or not which might be or is germane to this RFP.