# **REQUIRED FORMS**

The following form(s) will enable submitters to provide basic information and specific qualifications regarding the provision of insurance to the City of Gainesville. Provide all requested information, as responses are needed for comparison between all submissions. This form need not be typed; it may be handwritten in ink.

## SUBMISSION FORM FOR QUALIFICATION OF PROPERTY/CASUALTY INSURANCE AGENT OF RECORD

3.	Address:		
4.	Telephone:	Fax:	E-Mail:
Ins	surance Agent / Insurer Rep	resentative	
5.	Number of years in the insura	nce business:	
6.	Number of years with your pr	resent firm:	
7.	Number of public entities you	ı service:	
8.	Have you attached backgroun	nd information on yourself, e.g	g. resume?
9.	Have you attached an explana size, complexity and magnitude	• •	other public entities of similar
10.	Do you or does a key person major capacity have experien (The City considers such experien herein.)	,	ectric utility?
11.	Have you attached explanator	ry details of this experience?	
12.	Have you attached an explana public transportation operation	· ·	electric utility, gas utility and
13.	Will you provide the scope of	f agent services as outlined in	the RFQ?
14.	Will you commit to proactive	and aggressive pursuit of neg	gotiation of favorable policy

## Firm Background

16. Which of your firm's Florida offices will provide the ongoing services to the City?

15. Have you attached examples of such proactive and aggressive negotiations, etc.?

17. Will any other offices be involved; to what extent? Be specific.

terms, conditions and pricing of insurance coverage?

18. Years the firm has been in business:

1. Insurance Agent / Insurer Representative:

2. Firm Name:

19. Number of Florida public entities the firm services:

- 20. Have you attached an explanation of your firm's experience with other public entities of similar size, complexity and magnitude?
- 21. Have you attached an explanation of your firm's experience with electric utility, gas utility and public transportation operations, including commentary on specialists in these coverages, their location and their availability to the City when needed?
- 22. Firm's Florida premium volume:
- 23. Approximately what percentage of the firm's Florida business are public entities, in revenue volume, e.g. commissions, fees?
- 24. Have you provided background information on the range of your firm's services?
- 25. Are the key person's designated to services the City's account appropriately licensed by the State of Florida?

Regarding question 25, please complete the following table

Name	License Types	Years Serving Large Commercial Accounts	Years Serving Public Entities

- 26. Have you attached details of the experience of the listed persons with large commercial accounts and/or public entities with similar size and complexity as the City?
- 27. Have you attached details of other persons, and their background and office locales, that will be most involved in providing expertise regarding the City's electric utility?
- 28. What, specifically, is the firm's experience with power generating electricity utilities? How many, where located, and (briefly) what has the firm done for them?
- 29. What is the basis of the power generating electric utility expertise possessed by your key person(s) to be assigned to the City's account?
- 30. What kind of guarantee can you provide that the key person(s) with the power generating electric utility expertise will be available to the City when needed?
- 31. What is the specialist's knowledge of new technology for electric utilities and its relationship to insurance coverages and costs?
- 32. Provide specifics on agency personnel (employees or subcontractors other than staff of insurance companies) who are likely to be utilized in performing desired inspection and loss control services.
- 33. State the amount of errors and omissions insurance for the firm and the name of the insurer.
- 34. If you are invited to a finalist interview, are you willing to discuss with the interview committee investigations of alleged wrongdoings, litigation and/or settlements, and fines

or penalties (in the U.S.) involving your firm and the specific agents listed as projected to provide services to the City?

### Remuneration

35. State your total remuneration (as commissions, maximum commissions etc.) for the following coverages; and treat each as if it might be separable from the others (include, if you can, your transparency disclosure of the remuneration to be paid to the intermediary(ies) or wholesalers or others you plan to utilize (provide attachments if necessary):

City of Gainesville

	Proposing Agency		Inte	rmediary
Insurance Coverage	% of Premium	Maximum Commission	% of Premium	Maximum Commission
Excess Workers Compensation	%	\$	%	\$
Contractors Equipment	%	\$	%	\$
Employment Practices Liability	%	\$	%	\$
Public Officials Liability	%	\$	%	\$
Automobile Physical Damage	%	\$	%	\$
Law Enforcement Liability	%	\$	%	\$
City of Gainesville Employee Disability Fund Fiduciary Liability	%	\$	%	\$
City of Gainesville Fire and Police Fiduciary Liability	%	\$	%	\$
Lawyers Professional Liability	%	\$	%	\$
Special Events	%	\$	%	\$
Accidental Death & Dismemberment	%	\$	%	\$
Crime	%	\$	%	\$
Fine Arts Floater	%	\$	%	\$
Pollution and Remediation Legal Liability	%	\$	%	\$
Aviation – Helicopter	%	\$	%	\$
Rehab Dwellings – Property/Liability	%	\$	%	\$
Environmental Liability	%	\$	%	\$
Public Official Bonds – Two	%	\$	%	\$
Bond – Downtown Redevelopment	%	\$	%	\$
Property	%	\$	%	\$

Excess Property	%	\$ %	\$
Boiler and Machinery	%	\$ %	\$
Pension Trust Fiduciary Liability General Employee Pension Plan and Employee Disability	%	\$ %	\$
Pension Trust Fiduciary Liability Police and Firefighters	%	\$ %	\$
Aviation/Hangarkeepers Liability	%	\$ %	\$
Thomas Center / Fine Arts	%	\$ %	\$
Vacant Dwellings	%	\$ %	\$
Builders Risk – If Requested	%	\$ %	\$
TOTAL:	N/A	\$ N/A	\$

**Gainesville Regional Utilities** 

	Propos	ing Agency	Intermediary	
Insurance Coverage	% of Premium	Maximum Commission	% of Premium	Maximum Commission
Primary Property/Boiler & Machinery	%	\$	%	\$
Excess Property/Boiler & Machinery	%	\$	%	\$
General Liability - Deerhaven	%	\$	%	\$
Excess Liability - Deerhaven	%	\$	%	\$
Railroad Liability – Leased Cars Only	%	\$	%	\$
Railroad Physical Damage – Owned and Leased Cars	%	\$	%	\$
Electronic Data Processing	%	\$	%	\$
Bonds	%	\$	%	\$
TOTAL:	N/A	\$	N/A	\$

**Gainesville Regional Utilities Communication Services** 

Games the Regional Communication Sci tiecs					
	Propos	sing Agency	Intermediary		
Insurance Coverage	% of Premium	Maximum Commission	% of Premium	Maximum Commission	
General Liability	%	\$	%	\$	
Auto Liability	%	\$	%	\$	

Excess Liability	%	\$ %	\$
Electronic Data Processing	%	\$ %	\$
TOTAL:	N/A	\$ N/A	\$

### **Ironwood Public Golf Course**

	Propos	sing Agency	Inte	rmediary
Insurance Coverage	% of Premium	Maximum Commission	% of Premium	Maximum Commission
Package Property	%	\$	%	\$
Inland Marine	%	\$	%	\$
General Liability	%	\$	%	\$
Pollution Liability	%	\$	%	\$
Liquor Liability	%	\$	%	\$
Hired / Non-Owned Liability	%	\$	%	\$
Excess / Umbrella Liability	%	\$	%	\$
Golf Cart / Golf Maintenance	%	\$	%	\$
Golf Facilities Management Liability	%	\$	%	\$
Automobile Liability	%	\$	%	\$
Crime	%	\$	%	\$
TOTAL:	N/A	\$	N/A	\$

Are the above maximum commissions negotiable?

- 36. Will this remuneration be included within the premiums you propose, or in addition to net premiums proposed? Explain.
- 37. Number of years you are willing to guarantee this level of remuneration, regardless of premium changes? Explain.
- 38. Is proposed remuneration inclusive of marketing activity and services to be provided throughout the year? To what extent are there also fees for services, e.g. loss control, actuarial, windstorm modeling, property valuations? (Clearly explain any variable.)
- 39. To what extent will you need a separate contract for services not related to the insurance being purchased?
- 40. Do you acknowledge that the City reserves the right, at any time, to remove the agent of record status for one or more types of coverage if believed to be in the City's best interest to solicit such coverage from one or more parties involving other agents?

41. Do the submitting agency and agents agree to allow and pledge full cooperation to the City if it (at its option) desires an audit of the agency and related parties regarding the City's expenditures for the property/casualty insurance/self-insurance program and all related remuneration to the agency and agents and others involved, including the tracking of funds to intermediaries, insurers, etc?

#### General

- 42. Will you be available for the Agent finalist interviews is held if you are selected as a finalist?
- 43. Have you disclosed the name of any officer, director, agent or other key person who is also an official or employee of the City? If none, state "none".
- 44. Have you disclosed the name of any official or employee of the City who owns, directly or indirectly, an interest of five percent of more in a proposing firm or any of its branches? If none, state "none".
- 45. Reasons for the City qualifying your firm: describe below and by attachment the key reasons your firm should be qualified by the City to be the agent of record. Emphasize issues that make the firm unique, or give it special advantages over other submitters. Attach and supplemental documentation you think is relevant to your qualification.
- 46. Describe your ability to access, utilize and leverage key insurance markets.
- 47. If you represent unique and/or exclusive markets or specialty programs please explain and indicate if you think the City would be better off with these markets and programs than with the its current program.

### Additional Comments:

I have read the City of Gainesville's Request for Qualification for Agent of Record. I am submitting information based upon the representation that my firm is of sufficient size and capability and has sufficient experience to serve the City.

I understand that the City may conduct interviews with selected firms submitting proposals, and the City's decisions about interviews and selection shall be final.

This Request by the City is understood to be a solicitation of background information and qualifications from firms that may be designated as agent of record. I represent that I am authorized to provide this submission on behalf of my firm.

Date	Authorized Signature, Title	Firm	Telephone

Which are your preferred insurance company markets (intermediaries and wholesalers are not insurance company markets), in order of those you think can best serve the City with the best cost, coverage service?

Although the current program is being renewed regardless of submitting agent responses and the chosen agent of record is unlikely to be asked to replace the current program until the next renewal, the City wants to hear what each submitting agent things about the best markets available to serve the City.

Agents (including incumbent) are asked to provide indications of those insurance markets believed to be, by order of preference, those that would be in the best interests of the City for the following coverages The markets to be listed can be incumbent markets, or they can be different markets than the incumbent if you do not think current markets are in the City's best interest.

Although the numbering sequence is limited, additional insurers may be listed!

#	Insurer Name Also, include MGA/MGU, if Applicable	Insurer Group or Fleet Name	Your Firm's Estimated Annual FL Premium Volume	Direct Access Y/N	Group/ Fleet Exclusive Y/N
PAC	CKAGE POLICY (All Lines	Aggregate)			
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
PRI	MARY PROPERTY				
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
EXC	CESS PROPERTY	1			
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
BOI	LER AND MACHINERY				
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		
	CESS WORKERS COMPEN	ISATON			
1			\$		
2			\$		
3			\$		
4			\$		
5			\$		

POLICE PROFESSIONAL LIABILITY					
1		\$			
2		\$			
3		\$			
4		\$			
5		\$			
PUBLIC OFFICIALS AND EM	IPLOYMENT PRACTICE	S LIABILITY			
1		\$			
2		\$			
3		\$			
4		\$			
5		\$			
AUTOMOBILE PHYSICAL D	AMAGE				
1		\$			
2		\$			
3		\$			
4		\$			
5		\$			
1		\$			
2		\$			
3		\$			
4		\$			
5		\$			
1		\$			
2		\$			
3		\$			
4		\$			
5		\$			