



**THE KERALA STATE
CO-OPERATIVE BANK LTD**
(A Scheduled Bank)

THE KERALA STATE CO-OPERATIVE BANK LTD.

e-TENDER NOTICE DATED 19/06/2026

M/s. Kerala State Co-operative Bank Ltd. invite online insurance bids from **Public Sector / Co-operative Sector** Insurance Companies through their Regional/Zonal offices in Kerala, for providing **Group Personal Accident & Permanent Disability Cover** for the proposed “**KB Salary Pride Account**” holders either directly or through IRDA approved Insurance Broking companies.. The coverage will be offered free to account holders, with the **premium borne entirely by Kerala State Co-operative Bank Ltd.** Regional/Zonal Office, Kerala will be SPOC for this policy and should be capable of settling all the claim obligations and answer all insurance related queries. The tender documents can be downloaded free of cost from www.e-tenders.kerala.gov.in.

The technical and financial bids should be submitted by the bidder with the covers provided in the online tender.

- Bid Submission Start Date: 20/06/2026 : 10 AM
- Last date for availability of bid document: 04/07/2026 :03.00 PM
- Last date for submission of the completed bid documents: 04/07/2026 :04.00 PM
- Opening of technical bids: 06/07/2026: 3.00 PM
- Opening of financial bids: After verification of Technical bid

Completed bid documents should be submitted online on or before Last date for submission of the completed bid documents at www.e-tenders.kerala.gov.in any clarification on tender documents can be had from the following address:

The Chief Executive Officer
Kerala State Co-Operative Bank
Ltd. Palayam
Thiruvananthapuram-695033



Email: planning@keralabank.co.in correspondence/ communications on the scheme should be made at the above address. All the companies are requested to go through the Bid document carefully and submit their agreement and other requirements in specified format given in the bid.

PART 1 INFORMATION TO THE BIDDER ABOUT THE POLICY

BACKGROUND & PRODUCT OVERVIEW

Kerala Bank is launching a new tiered salary account named “**KB Salary Pride Account**” with three tiers. Bank proposes to open minimum 2 new account in a month through 824 branches across Kerala and attain 20000 accounts in 12 months. The structure of the accounts are as follows :

Tier	Monthly net Salary Range	Target Segment
Silver	₹10,000 – ₹49,999	Entry-level, first-time jobbers, government employees
Gold	₹50,000 – ₹99,999	Mid-level professionals, Teachers, government/private employees
Platinum	₹1,00,000 and above	Senior professionals, managers

A key differentiator of this product is **automatic free insurance cover** (Personal Accident – Death and Permanent Disability) for the primary account holder. The bank will pay the group premium.

SECTION 3: SCOPE OF INSURANCE COVERAGE

3.1 Eligible Persons

All resident individual salary account holders under KB Salary Pride Account (primary account holder only; family members are **not** covered under this policy).

3.2 Projected Year-1 Accounts (for quoting purpose)

Tier	Projected Number of Accounts	Age Group
Silver	10,000	18 - 58
Gold	7,000	
Platinum	3,000	
Total	20,000	



*Note: Actual numbers may vary by ±25% in the first year. The premium quoted shall be on a **per account per annum** basis, and the final premium payable will be based on actual enrolled accounts.*

3.3 Sum Insured Required (per account, per year)

Tier	Personal Accident – Death Cover (₹)	Permanent Disability Cover (₹)
Silver	₹10 Lakh	₹5 Lakh
Gold	₹10 Lakh	₹10 Lakh
Platinum	₹15 Lakh	₹10 Lakh

3.4 Definition of Permanent Disability

- a. **Total Permanent Disability (TPD):** The Company to pay the benefit equal to 100% of Capital Sum Insured, if an Insured Person suffers Permanent Total Disablement of the nature specified below, solely and directly due to an Accident during the Policy Period, provided that the Permanent Total Disablement occurs within 12 months from the date of the Accident:
- Total and irrecoverable loss of sight of both eyes or
 - Physical separation or loss of use of both hands or feet or
 - Physical separation or loss of use of one hand and one foot or
 - loss of sight of one eye and physical separation or loss of use of hand or foot
 - If such Injury shall as a direct consequence thereof, permanently, and totally, disables the Insured Person from engaging in any employment or occupation of any description whatsoever.
- b. **Partial Permanent Disability (PPD):** The Company to pay a fixed percentage of Capital Sum Insured, specified in the policy schedule, if the Insured Person suffers Permanent Partial Disablement solely and directly due to an Accident during the Policy Period provided that the Permanent Partial Disablement shall occur within 12 months of the date of the Accident. (to be specified)

3.5 Coverage Features

- 24×7 worldwide coverage.**
- No medical examination required.
- Coverage activates **From next month first working day onwards after opening the salary account**
- Sum insured remains constant throughout the policy year.

3.6 Standard Exclusions

- Self-inflicted injury, suicide, attempted suicide, sexually transmitted conditions, mental disorder, anxiety, stress or depression.
- Under the influence of alcohol or drugs or other intoxication or hallucinogens
- Participation in criminal acts, riots, war, nuclear perils.
- Adventure sports (unless covered by a rider – may be quoted separately).
- Professional sports team in respect of specific benefit for inability to perform
- Participation in any kind of motor speed contest



7. While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers)
8. Underground mining & contractor specializing in tunneling and Offshore activities
9. Naval, military or air force personnel
10. Radioactivity, Nuclear risks, ionizing radiation
11. Insect bite
12. While insured is engaged in aviation
13. Non fare paying passenger in aircraft
14. Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor
15. Committing any breach of law of land with criminal intent.
16. Death or disablement resulting from Pregnancy or childbirth
17. War Group perils
18. Venereal diseases / insanity

SECTION 4: PREMIUM QUOTATION FORMAT

Bidders must quote **per account per annum** premium (₹) **inclusive of all taxes (GST)** as per the table below. The bank will not pay any amount beyond the quoted figure.

Tier	Personal Accident – Death Premium (₹)	Permanent Disability Premium (₹)	Total Premium per Account (₹, incl. tax)	Total Nos	Total Premium
Silver				10000	
Gold				7000	
Platinum				3000	
Total					

Total Annual Premium for 20,000 accounts (using the projected mix: Silver 10,000, Gold 7,000, Platinum 3,000):

₹ _____ (to be calculated and filled by bidder)

SECTION 5: POLICY TERMS & CONDITIONS

5.1 Policy Type

Group Personal Accident and Permanent Disability Policy (Master Policy).

5.2 Policy Period

- a) Initial term: **One year** from the date of policy issuance.
- b) Renewal on mutually agreed terms, subject to claim performance.



5.3 Premium Payment

1. Premium for each salary account holder shall be paid by the bank on the **next month first working day onwards after opening the salary account**
2. Premium shall be calculated on a **pro-rata monthly basis**.
3. **If paid on the policy start date** → covers 12 months → full annual premium.
4. **If paid one month later** → covers 11 months → (11/12) of annual premium.
5. **If paid two month later** → covers 10 months → (10/12) of annual premium.

5.4 Enrollment & De-enrollment

- a) Bank will provide a monthly digital feed of eligible account holders (name, age, gender, tier, date of first salary credit).
- b) Insurer shall issue endorsement copies of insurance for verification.
- c) Monthly additions and deletions to be issued through endorsements

5.5 Claim Settlement

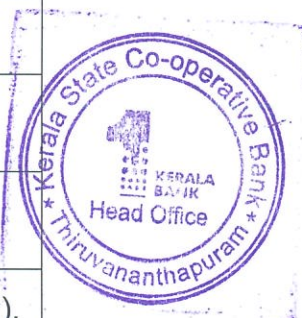
- a) **Turnaround time:** Within 30 days from the date of receipt of last necessary document .
- b) **Claim reporting:** Via dedicated toll-free number, email, or branch intimation.
- c) **Claim payment:** Directly to nominee / legal heir and intimation copy to Bank's Head Office

5.6 Service Requirements

- a) Dedicated relationship manager for Kerala Bank.
- b) 24x7 claim helpline.
- c) Quarterly claims and utilization MIS.
- d) Optional API integration for real-time enrollment (preferred).

SECTION 6: BIDDER ELIGIBILITY

#	Criteria
1	Valid IRDAI license to carry out general insurance business in India.
2	Minimum 5 years of experience in group personal accident insurance.
3	Minimum net worth of ₹500 Crore as per last audited balance sheet.
4	Claim settlement ratio for the company \geq 90% in each of the last 3 years.
5	Solvency ratio \geq 1.5 as per IRDAI (not applicable for PSU)
6	No major regulatory penalty in last 3 years (minor penalties to be disclosed).



PART II

SUBMISSION OF BIDS

M/s. KERALA STATE CO-OPERATIVE BANK Ltd. need detailed proposals from insurance companies interested in implementing **GROUP PERSONAL ACCIDENT & PERMANENT DISABILITY COVER**. The bid document should include the following:

SECTION A - TECHNICAL BID REQUIREMENTS

Bidders must submit the following in a sealed envelope marked “**Technical Bid – KB Salary Pride Insurance**”:

1. Covering letter on company letterhead.
2. Copy of IRDAI license.
3. Audited financial statements for last 3 years.
4. Solvency certificate from IRDAI or actuary. (if applicable)
5. Claim settlement ratio
6. List of at least 3 similar group insurance clients
7. Sample master policy wording (group personal accident & disability).
8. Detailed claim processing mechanism and average turnaround time.
9. Proposed servicing office within Kerala for Kerala State Co-operative Bank.

SECTION B: FINANCIAL BID

The **Financial Bid** must be in a separate sealed envelope marked “**Financial Bid – KB Salary Pride Insurance**” and contain only the filled premium table from **Section 4** (plus optional riders if any). No technical details should be in the price bid.

SUBMISSION & EVALUATION PROCESS

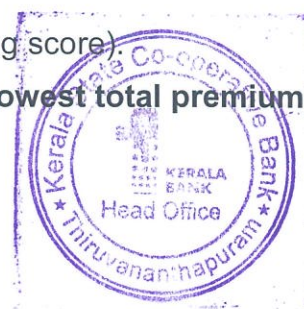
Bid Submission

- Two envelopes: **Techno-commercial** (Technical Bid) and **Price Bid**.
- Both placed in a single outer envelope superscribed with tender reference and “KB Salary Pride Insurance”.
- Address to: *The General Manager, BPCC Department, Kerala State Co-operative Bank, Head Office, Thiruvananthapuram – 695033*

Evaluation

- **Stage 1:** Technical bid evaluation – pass/fail (minimum 70% qualifying score).
- **Stage 2:** Financial bid opening of technically qualified bidders – **L1 (lowest total premium)** will be selected.
- Bank reserves the right to negotiate with L1 bidder.

Validity



Quotes shall remain valid for **90 days** from the last date of submission.

RIGHT TO REJECT

Kerala Bank reserves the right to:

- Reject any or all bids without assigning any reason.
- Accept the bid that best serves the bank's interest (not necessarily the lowest).
- Modify the scope of coverage or number of accounts before policy issuance.

CONTACT FOR CLARIFICATIONS

Nodal Officer:

Deputy General Manager

Email: planning@keralabank.co.in

Written clarifications must be sought by **June 26, 2026**.

Issuing Authority:

(Authorised Signatory)

General Manager

The Kerala State Co-operative Bank Ltd.

BPCC Department

Head Office, Cobank Towers, Palayam, Thiruvananthapuram -695033

Note: Any special conditions/warranties/exclusions/deductibles/excess other than standard conditions in any of the above policies will attract disqualification.



1. **Period of Insurance:** The period of insurance is one year
2. **Repudiation of claim:** In case of any claim is found untenable, the insurer shall communicate reasons in writing to the intermediary & M/s. KERALA STATE CO-OPERATIVE BANK Ltd. at the time of repudiation.
3. **Selection of Underwriting office/ Policy servicing office:** Insurer should select the underwriting office based on M/s. KERALA STATE CO-OPERATIVE BANK's convenience/ Requirement.
4. The selected insurance Company has to agree to settle the claim within 30 days of receipt of standard claim documents. In case of any deficiency in the submitted documents, the insurance company has to intimate this within 10 days of receipt of documents.
5. **Policy Termination:** Before the end of the period by
 - a. a) mutual consent or
 - b. b) by either party giving 60 days notice period.
6. **Award of Contract:** M/s. KERALA STATE CO-OPERATIVE BANK LTD shall award the contract to the successful bidder/s whose bid/s has/have been determined to be substantially responsive, lowest evaluated bid, provided that the bidder has been determined by the M/s. KERALA STATE CO-OPERATIVE BANK LTD to be qualified to perform the contract satisfactorily, and provided further that in evaluating the financial bid, the financial implications, if any, of the corresponding technical bid, have also been taken into reckoning. M/s. KERALA STATE CO-OPERATIVE BANK Ltd. has the final right to accept or reject any bids submitted.
7. **Amendment of Bidding Documents:**
 - a. At any time prior to the deadline for submission of bids, M/s. KERALA STATE CO-OPERATIVE BANK LTD may, for any reason modify the Bidding documents, by issuing a corrigendum.
 - b. The corrigendum will be notified on the e-Procurement website of Kerala www.etenders.kerala.gov.in and will not be issued or available anywhere else. Hence, interested agencies/ bidders are advised to regularly check the above websites for any updates on this tender.
 - c. In order to afford prospective bidders reasonable time to take the amendment into account in preparing their bids, M/s. KERALA STATE CO-OPERATIVE BANK may, at its discretion, extend deadline for the submission of the Bid through a date corrigendum online.
8. **Right to Accept or reject any or All Bids:** M/s KERALA STATE CO-OPERATIVE BANK reserves the right to accept or reject any Bid or annul the Bidding process and reject all Bids at any



time prior to award of contract, without thereby incurring any liability to the affected Bidder or Bidders. M/s KERALA STATE CO-OPERATIVE BANK is not bound to accept the lowest or any bid.

9. Notification of Award and Signing of Agreement: The Notification of Award will be issued with the approval of the Tender Accepting Authority. The terms of Agreement will be discussed with the representatives of the successful insurance company and Broking Intermediary, which is expected to furnish a duly signing Agreement proposed by M/s. KERALA STATE CO-OPERATIVE BANK in duplicate within 7 days of declaration of 'award of contract', failing which the contract may be offered to the next bidder in order of merit.

10. Canvassing: Bidders are hereby warned that canvassing in any form for influencing the process of notification of award would result in disqualification of the Bidder.

11. Signature in each page of document: All the Annexure formats of the Bid Document must be signed by the competent authority of the Bidder.

12. Submission of Proposals: M/s. KERALA STATE CO-OPERATIVE BANK Ltd. seeks detailed bid from Public Sector General Insurance Companies interested in implementing the scheme as detailed in the guidelines. (PART-1).

The e-tender will be of two bid system **Section A - Technical Bid** for implementing "GROUP PERSONAL ACCIDENT & PERMANENT DISABILITY COVER" and **section B- Financial Bid** for implementing, "GROUP PERSONAL ACCIDENT & PERMANENT DISABILITY COVER" The financial bid of the technically qualified firms only will be opened.



PART II

SUBMISSION OF BIDS

M/s. KERALA STATE CO-OPERATIVE BANK Ltd. need detailed proposals from Nationalised/Co-operative sector insurance companies interested in implementing Group Personal Accident & Permanent Disability Cover for the proposed “KB Salary Pride Account” holders for a period of One Year. The bid document should include the following:

SECTION A – TECHNICAL BID

A. QUALIFYING CRITERIA:

A. Check List for Technical Bid (**Annexure-1**)

II) Details of the bidder (**Annexure-2**)

III) Insurance company should be registered with Insurance Regulatory and Development Authority (IRDA) to undertake insurance related activities. The Insurer should attach a copy of the license as a proof of its registration. (**Annexure-3**)

IV) The Insurer has to provide an undertaking, as per format given in (**Annexure 4**), expressing their explicit agreement to adhere with the details of the scheme as mentioned in the PART 1 of the tender document. (**Annexure-4**)

V) **Other Information:** Bidder is supposed to give point-wise reply of the Tender document for any disagreement of the tender terms PART 1, In **Annexure 5**

VI) **Statement of Financial Bid:** Bidder has to provide a statement, as per format given in (**Annexure 6**),

Note: *The qualifying requirement data shall be enclosed with the Technical bid only. The bidders who do not qualify this criterion will be disqualified immediately and their bids will not be considered.*



SECTION B – FINANCIAL BID

(KINDLY NOTE THAT FINANCIAL BID SHOULD BE BOQ through Kerala Government e-tender portal only)

Financial costs including all taxes and charges that the insurance company / M/s. KERALA STATE CO-OPERATIVE BANK expects for rendering the services as approved by IRDA, should be a part of the premium.

Note:

- 1. The Insurance Company must release the quotation through their Regional/Zonal Office in Kerala.***
- 2. No other document or attachment shall be permissible along with Financial Bid.***
- 3. Any deviation will attract disqualification***



SECTION C – SUMMARY OF BID

Following table provides a brief summary of the documents which need to be attached by insurer in the technical bid and financial bid:

Sec. C-1 SECTION A- DETAILS OF DOCUMENTS TO BE SUBMITTED FOR TECHNICAL BID

SL NO	Selection of Technical Bid	Details By Insurer
A	Qualifying criteria:	
I	Check List for Technical Bid	Annexure 1 (As per format attached)
II	Declaration by the insurer	Format as per Section D
II	Details of the company	Annexure 2 (As per format attached)
III	IRDA license	Annexure 3 (As per format attached)
IV	Undertaking for adherence to the tender	Annexure 4 (As per format attached)
V	Other information	Annexure 5 (As per format attached)
VI	Statement of Financial Bid	Annexure 6 (As per format attached)
VII	Draft Insurance Policy for perusal from bank's side	Annexure 7(as per the regular policy format adopted by the Insurer)

Sec- C2 SECTION B- DETAILS OF DOCUMENTS TO BE SUBMITTED FOR FINANCIAL BID

SL NO	Selection of financial Bid	Details By Insurer
A	Qualifying criteria:	
1	Financial proposal	(BOQ in www.etenders.kerala.gov.in)

NOTE: Insurance Companies are supposed to give point-wise reply of the tender document for agreement/disagreement and attach the necessary annexure as mentioned above.



SECTION D

FORMAT – DECLARATION BY THE INSURANCE COMPANY [On letterhead of the Insurance Company]

From
[Name of Insurance Company]
[Address of Insurance Company]
Date: [insert date], 2026

To **Chief Executive Officer**
Kerala State Co-operative Bank Ltd.,
Head Office, Cobank Towers,
Thiruvananthapuram

Dear Sir,

I, [insert name] designated as [insert title] at [insert location] of [insert name of Bidder] and

Being the authorized signatory of the Bidder, do hereby declare and undertake that I have read the

Contents of the tender document and hereby submit the bid in the desired format with respective

Annexure duly signed by me.

Signature:

Name:

Designation:

Date:



SECTION E

Annexure-1

FORMAT – CHECK LIST FOR TECHNICAL BID

Name of the Insurance Company: _____

SL NO	Selection of Technical Bid	Details By Insurer	Documents Submitted (Yes/No)
A	Qualifying criteria:		
1.	Declaration by the insurer	As per Section D Format	
2.	Details of the company	Annexure 2 (As per format attached)	
3.	IRDA license	Annexure 3	
4.	Undertaking for adherence to the tender	Annexure 4 (As per format attached)	
5.	Other information	Annexure 5 (As per format attached)	
6.	Statement of Financial Bid	Annexure 6 (As per format attached)	
7.	Draft Insurance Policy for perusal from bank's side	Annexure 7(as per the regular policy format adopted by the Insurer)	



Annexure – 2

FORMAT – DETAILS OF THE INSURANCE COMPANY

[On letterhead of the Insurance Company]

1. Details of the Company

a. Name:

b. Address of the corporate headquarters and its office head in the State:

2. Details of individual(s) who will serve as the point of contact /communication:

a. Name:

b. Designation:

c. Company:

d. Address:

e. Telephone Number:

f. E-mail Address:

g. Fax Number:

3. Particulars of the Authorized Signatory of the Bidder:

a. Name:

b. Designation:

c. Company:

d. Address:

e. Telephone Number:

f. E-mail address :

g. Fax number:



Annexure-4

FORMAT – UNDERTAKING REGARDING COMPLIANCE WITH TERMS OF SCHEME

[On letterhead of the Insurance Company]

From
[Name of the Insurance Company]

[Address of the Insure Company]

Date: [insert date], 2026

To Chief Executive Officer
Kerala State Co-operative Bank Ltd.,
Head Office, Cobank Towers,
Thiruvananthapuram

Dear Sir,

Sub: Undertaking Regarding Compliance with Terms of Scheme

I, [insert name] designated as [insert title] at [insert location] of [insert name of Bidder] and being the authorized signatory of the Bidder, do hereby declare and undertake that we have read the Tender Documents for award of Contract(s) for the renewal of Bankers Indemnity & Assets /Securities – Traditional Insurance Policies policy.

We hereby undertake and explicitly agree that if we are selected as the Successful Bidder, we shall adhere to and comply with the terms of the policy as set out in the Tender Documents and the Contract(s).

Dated this ___ day of ___, 2026

[Signature]
In the capacity of
[Position]
Duly authorized to sign this Bid for and on behalf of

[Name of Insurance Company]



Annexure 5

Other Information:

[On letterhead of the Insurance Company]

Bidder is supposed to give point-wise reply of the Tender document for agreement/disagreement. Any major disagreement from scheme attracts disqualification.



Annexure 6

SECTION B

STATEMENT – FINANCIAL BID

[On letterhead of the Insurance Company]

From

[Insert name of the Insurance Company]

[Insert address of the Insurance Company]

Date: [insert date], 2026

To Chief Executive Officer
Kerala State Co-operative Bank Ltd.,
Head Office, Cobank Towers,
Thiruvananthapuram

Dear Sir,

Sub: Statement of Financial Bid for Implementation of Bankers Indemnity & Asset policies.

With reference to your Tender Documents dated We, [insert name of Bidder], wish to submit our Financial Bid for the award of the Contract(s) for the renewal of the Bankers Indemnity & Asset policies. Our details have been set out in our Technical Bid.

- A. We hereby submit our Financial Bid, which is unconditional. We have examined the Tender Documents, including all the Addenda.
- B. We acknowledge that M/s. KERALA STATE CO-OPERATIVE BANK LTD. will be relying on the information provided in the Bid for evaluation and comparison of Financial Bids received from the Eligible Bidders and for the selection of the Successful Bidder for the award of the Contract for the renewal of the Bankers Indemnity policy. Nothing has been omitted which renders such information misleading and all documents accompanying our Bid are true copies of their respective originals.
- C. We shall make available to the M/s. KERALA STATE CO-OPERATIVE BANK any clarification it may find necessary or require supplementing or authenticate the Bid.
- D. We acknowledge the right of the M/s. KERALA STATE CO-OPERATIVE BANK to reject our Bid or not to select us as the Successful Bidder, without assigning any reason or otherwise and we hereby waive, to the fullest extent permitted by applicable law, our right to challenge the same on any account whatsoever.

E. We acknowledge and confirm that all the undertakings and declarations made by us in our Technical Bid are true, correct and accurate as on the date of opening of our Bid and shall continue to be true, correct and accurate for the entire validity period of our Bid.



- F. We acknowledge and declare that the M/s. KERALA STATE CO-OPERATIVE BANK is not obliged to return the Bid or any part thereof.
- G. We undertake that if there is any change in facts or circumstances during the Bidding Process which may render us liable to disqualification in accordance with the terms of the Tender Documents, we shall advise the M/s. KERALA STATE CO-OPERATIVE BANK of the same immediately.
- H. We are quoting the below requirement / requirements in line with policy conditions given in part1 of the tender - **"GROUP PERSONAL ACCIDENT & PERMANENT DISABILITY COVER"**

[Note:

- 1. The rate shall be quoted only in BOQ Excel Sheet provided in the Tender Document Section.**
- 2. There should be SINGLE premium quote for the policy as per the respective options specified in part1**
- 3. The Bidders are required to quote the Premium up to two decimal points**
- 4. No other document or attachment shall be permissible along with Annexure-6.**
- 5. Any deviation will attract disqualification.**

- I. We acknowledge, confirm and undertake that:
- a) The terms and conditions of the Tender Documents and the Premium being quoted by us for the implementation of the Scheme are determined on a technically sound basis, are financially viable and sustainable on the basis of information.
- J. We hereby irrevocably waive any right or remedy which I/we may have at any stage at law or howsoever arising to challenge the criteria for evaluation of the Financial Bid or question any decision taken by the M/s. KERALA STATE CO-OPERATIVE BANK in connection with the evaluation of the Financial Bid, declaration of the Successful Bidder, or in connection with the Bidding Process itself, in respect of the Contract and the terms and implementation thereof.
- K. We agree and undertake to abide by all the terms and conditions of the Tender Documents.
- L. We agree and understand that the Bid is subject to the provisions of the Tender Documents. In no case, shall we have any claim or right against the M/s. KERALA STATE CO-OPERATIVE BANK Ltd., if the Contract is not awarded to us or our Financial Bid is not opened or found to be substantially non-responsive.
- M. This Bid shall be governed by and construed in all respects according to the laws for the time being in force in Thiruvananthapuram, Kerala.

In witness thereof, we submit this Financial Bid under and in accordance with the terms of the Tender Document.

Dated this ___ day of ___, 2026



[Signature]
In the capacity of
[Position]
Duly authorized to sign this Bid for and on behalf of

[Name of Insurance Company]

